

28 OCT 1963



**THE HEALTH  
OF  
WALSALL  
1962**






WALSALL  
COUNTY BOROUGH  
HEALTH REPORT  
**1962**

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THOMAS ROSS, M.B., Ch.B., D.P.H.

Medical Officer of Health and  
Principal School Medical Officer



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# COUNTY BOROUGH OF WALSALL

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## HEALTH COMMITTEE

From May, 1962 to May, 1963

CHAIRMAN:

Councillor D. M. Middleton

VICE-CHAIRMAN:

Councillor R. H. M. Baines

Alderman E. A. Brockhurst, J.P.	Councillor E. Elliott
Alderman H. S. Gwinnutt	Councillor A. V. Fletcher
Alderman D. L. Harrington	Councillor J. Gavin
Alderman B. E. Hemmings	Councillor A. M. M. Taylor
Councillor N. Daniel	Councillor C. J. P. Wood

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## EDUCATION COMMITTEE

CHAIRMAN:

Alderman F. F. Harrison

VICE-CHAIRMAN:

Councillor P. H. Musgrove

Alderman E. A. Brockhurst, J.P.	Councillor J. V. Winter
Alderman T. P. Riley, J.P.	Mrs. V. G. Parkes
Councillor W. Clarke	Mrs. E. A. Riley
Councillor E. Elliott	Mrs. M. Talbot
Councillor E. M. Flint	Rev. K. Lawton
Councillor J. Gavin	Very Rev. Canon J. W. Dunne, M.A.
Councillor D. M. Middleton	Rev. V. S. Nicholls
Councillor W. E. Nunn	Mr. R. S. Hawkins
Councillor B. S. Powell	Mr. A. W. Lester
Councillor A. M. M. Taylor	Mr. F. Robottam
Councillor A. V. Townsend	

## STAFF

(at 31st December, 1962)

MEDICAL OFFICER OF HEALTH AND PRINCIPAL SCHOOL MEDICAL OFFICER ... ..	Thomas Ross, M.B., Ch.B., D.P.H.
DEPUTY MEDICAL OFFICER OF HEALTH ... ..	G. P. A. Evans, M.B., Ch.B., D.P.H.,
SENIOR MEDICAL OFFICER FOR MATERNITY AND CHILD WELFARE	I. M. Brown, M.B., Ch.B., D.P.H., M.M.S.A., D.R.C.O.G., D.C.H.
ASSISTANT MEDICAL OFFICERS OF HEALTH ... ..	W. I. McNeilly, M.B., Ch.B. M. C. Grant, L.R.C.P., L.R.C.S., D.R.C.O.G., D.P.H. P. M. Twist, M.R.C.S., L.R.C.P., D.P.H.
PRINCIPAL SCHOOL DENTAL OFFICER	Mrs. I. M. Millar, L.D.S.
CHIEF PUBLIC HEALTH INSPECTOR	C. A. Stansbury, O.B.E., F.A.P.H.I., F.R.S.H.
DEPUTY CHIEF PUBLIC HEALTH INSPECTOR ... ..	J.P. Barton, D.M.A., A.M.I.P.H.E., M.A.P.H.I.
Staff ... ..	6 Specialist Public Health Inspectors (2 vacancies). 2 Senior District Public Health Inspectors. 3 District Public Health Inspectors (2 vacancies). 4 Pupil Public Health Inspectors. 1 Senior Clerk and 7 Clerks.
PUBLIC ANALYST ... ..	C. N. Grange, B.Sc., F.R.I.C.
DEPUTY PUBLIC ANALYST ... ..	R. K. Chalmers, B.Sc., F.R.I.C.
SUPERINTENDENT HEALTH VISITOR	Miss G. Johnson.
Staff ... ..	9 Health Visitors (8 Full-time, 1 Part-time). 1 Acting Health Visitor. 1 Tuberculosis Visitor (Part-time). 4 Clinic Nurses. (1 Full-time, 3 Part- time). 4 School Nurses.
SUPERVISOR OF MIDWIVES ... ..	Mrs. M. E. Smith.
Staff ... ..	15 Municipal Midwives.
SUPERINTENDENT OF DISTRICT NURSES ... ..	Miss R. E. Bennion.
Staff ... ..	12 District Nurses—Full-time. 2 District Nurses—Part-time.
ADMINISTRATIVE ASSISTANT ... ..	H. D. Parsons.
Staff ... ..	11 Clerks (10 Full-time, 1 Part-time). 3 Sales Clerks—Part-time.
CHIROPODISTS (PART-TIME) ... ..	Mrs. E. M. McKerlie. Mr. C. J. Bradbury.
SENIOR MENTAL WELFARE OFFICERS	F. H. Parker. Miss F. Grant.
SUPERVISOR SPECIAL TRAINING CENTRE ... ..	Miss E. Ratford.
SOCIAL CASE WORKER ... ..	Mrs. J. M. Thompson.
MATRON—DAY NURSERY ... ..	S. Kulick.
AMBULANCE SUPERVISOR ... ..	H. J. Addison.
HOME HELP ORGANISER ... ..	Mrs. J. M. Berlin.



## SUMMARY OF STATISTICS, 1962

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Area in Acres ... ..	8,777
Number of Structurally Separate Dwellings (At Census 1961) ... ..	35,630
Population 1962 (estimated) ... ..	119,700
Rateable Value (1/4/62) ... ..	£1,433,455
Sum represented by a Penny Rate (1962/63) ... ..	£5,825
Live Births:—	
Number (M. 1,190; F. 1,156) ... ..	2,346
Rate per 1,000 population ... ..	19.60
do. (standardised) ... ..	18.62
Illegitimate Live Births per cent of total live births ...	6.14
Stillbirths:—	
Number (M. 22; F. 20) ... ..	42
Rate per 1,000 total live and still births ... ..	17.59
Total Live and Still Births (M. 1,212; F. 1,176) ... ..	2,388
Infant Deaths (deaths under 1 year) (M. 37; F. 24) ...	61
Infant Mortality Rates:—	
Total infant deaths per 1,000 total live births ...	26.00
Legitimate infant deaths per 1,000 legitimate live births	25.89
Illegitimate infant deaths per 1,000 illegitimate live births ... ..	27.78
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births) ... ..	17.48
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births) ... ..	15.35
Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths)	32.66
Maternal Mortality (including abortion):—	
Number of deaths ... ..	1
Rate per 1,000 total live and stillbirths ... ..	0.42
Deaths:—	
Number (M. 681; F. 618) ... ..	1,299
Rate per 1,000 population ... ..	10.85
do. (standardised) ... ..	13.13

## SECTION A. VITAL STATISTICS

### Population

The continued upward trend of the population of Walsall over the last five years is shown below:—

1958	...	...	115,000
1959	...	...	115,100
1960	...	...	115,390
1961	...	...	118,610
1962	...	...	119,700

### Live and Still-births

The 2,346 live births in the Borough during 1962 showed an increase of 76 as compared with 1961. The birth rate of 19.60 per thousand population compares with 18.0 for England and Wales. 42 still-births occurred to Walsall women, giving a rate per thousand live and still-births of 17.59, the rate for England and Wales being 18.1.

### Deaths

There were 1,299 deaths of Walsall residents during 1962, giving a death rate of 10.85 per thousand population, as compared with 11.28 in 1961. Heart disease was again the principal cause of death, over one quarter of the total deaths being due to this cause. 254 persons died from cancer during the year. The rate for England and Wales was 11.9.

### Infant Deaths

Ten more children under one year of age died during 1962 than in 1961, giving a rate of 26.00 per thousand live births, as compared with 22.47. The corresponding rate for England and Wales was 20.7.

After two very favourable years it is most disappointing to have to report an infant death rate well above the national average. Whilst we must accept that there is a hard core of unavoidable infant deaths the total figure could certainly be lessened if diligent use was made of the services available for expectant mothers. It is the duty of expectant mothers to take advantage of the comprehensive services provided by the hospitals, general practitioners and at local health authority clinics. The following table shows the number of infant deaths and rates for the last twenty years:—

Number of infant			Rate per thousand	
		deaths		live births
1943	...	125	...	58.30
1944	...	131	...	60.17
1945	...	116	...	57.28
1946	...	105	...	43.48
1947	...	127	...	50.14
1948	...	99	...	42.76
1949	...	123	...	55.63

1950	...	59	...	28.64
1951	...	75	...	37.18
1952	...	75	...	36.50
1953	...	84	...	40.82
1954	...	60	...	30.77
1955	...	65	...	34.14
1956	...	54	...	27.04
1957	...	53	...	26.57
1958	...	58	...	27.31
1959	...	65	...	34.17
1960	...	49	...	21.65
1961	...	51	...	22.47
1962	...	61	...	26.00

### Maternal Deaths

There was one death associated with pregnancy during the year, giving a rate of 0.42 per 1,000 live and still births. The rate for England and Wales was 0.35.

The mother in question unfortunately died within three weeks after the birth of the baby and after fully considering the medical aspects of the case I am somewhat reluctant to accept that the death was actually associated with pregnancy.

### Coroner's Inquests

The number of deaths reported to the Coroner during the year was 276 (206 males and 70 females).

Deaths investigated by the Coroner but no inquest held	161
POST-MORTEM EXAMINATIONS ordered by Coroner ...	267

### VERDICTS RETURNED AT INQUESTS:—

	M.	F.
Death by Murder ... ..	—	—
Death by Suicide ... ..	7	7
Death by Manslaughter ... ..	—	—
Death by Self-induced Abortion ... ..	—	—
Death aggravated by lack of care or self-neglect	1	—
Death by want of Attention at Birth ... ..	—	—
Death by Want, Exposure, etc. ... ..	—	—
Death by Accident or Misadventure ... ..	49	11
Death from Natural Causes ... ..	24	3
Death from Industrial diseases ... ..	13	—
Stillborn ... ..	—	—
Open Verdicts ... ..	1	—
	<hr/> * 95	<hr/> 21

2 inquests adjourned and not resumed.

5 deaths reported during the year will be dealt with in 1963 verdicts.

\* Includes verdicts on 8 deaths reported in 1961.



# CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN WALSALL COUNTY BOROUGH 1962

As furnished by the Registrar-General

CAUSES OF DEATH		Sex	All Ages	0-	1-	5-	15-	25-	45-	65-	75-
ALL CAUSES	.. ..	M. F.	681 618	37 24	5 4	8 4	10 5	15 28	217 122	179 159	210 272
1. Tuberculosis—Respiratory	..	M. F.	5 3	— —	— —	— —	— —	— —	3 —	2 2	— 1
2. Tuberculosis—Other	..	M. F.	1 1	— —	1 —	— —	— —	1 —	— —	— —	— —
3. Syphilitic Disease	..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
4. Diphtheria	..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
5. Whooping Cough	..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
6. Meningococcal Infections	..	M. F.	1 2	— —	— 1	— —	1 1	— —	— —	— —	— —
7. Acute Poliomyelitis	..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
8. Measles	..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
9. Other Infective and Parasitic Diseases	..	M. F.	2 1	— —	— —	1 —	— —	— —	1 —	— 1	— —
10. Malignant Neoplasm—Stomach	..	M. F.	19 22	— —	— —	— —	— —	1 —	9 10	6 5	3 7
11. " " Lung, Bronchus	..	M. F.	63 15	— —	— —	— —	— —	2 2	33 7	24 6	4 —
12. " " Breast	..	M. F.	— 24	— —	— —	— —	— —	— 3	— 11	— 3	— 7
13. " " Uterus	..	F.	10	—	—	—	—	2	3	4	1
14. Other Malignant and Lymphatic Neoplasms		M. F.	52 49	— 1	2 —	1 —	— 2	— 3	20 18	19 19	10 6
15. Leukæmia, Aleukæmia	..	M. F.	1 5	— 1	— —	— 1	— —	— 1	1 1	— 1	— —





# INFANT MORTALITY DURING THE YEAR 1962 Deaths from stated Causes at various ages under One year of age

CAUSES OF DEATH	Total Deaths under 1 year	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	1 & under 3 months	3 & under 6 months	6 & under 9 months	9 & under 12 months	Bloxwich East	Bloxwich West	Leamore	Blakenall	Birchills	Hatherton	Paddock	Bridge	Pleck	Caldmore	Palfrey
Measles .. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Encephalitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diarrhoea and Enteritis	3	—	1	—	—	1	—	—	1	1	—	1	—	1	—	—	1	—	—	—	—
Premature Birth ..	18	17	—	—	—	17	—	1	—	—	1	—	4	3	1	1	—	2	2	3	1
Congenital Malformations	14	8	1	1	—	10	2	1	—	1	1	4	1	1	1	1	—	—	2	2	1
Infant Diseases ..	4	4	—	—	—	4	—	—	—	—	1	1	—	—	1	—	—	1	—	—	—
Influenza ..	1	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—
Pneumonia ..	4	1	—	—	—	1	1	1	1	—	1	1	2	—	—	—	—	—	—	—	—
Bronchitis ..	2	—	—	—	—	—	—	1	1	—	—	—	—	—	—	2	—	—	—	—	—
Accidents ..	3	—	—	1	—	1	—	2	—	—	1	—	1	—	—	1	—	—	—	—	—
Other Causes ..	12	6	1	—	—	7	2	2	—	1	—	1	2	2	1	2	1	2	—	1	—
Totals .. ..	61	36	3	2	—	41	5	9	3	3	6	8	10	7	4	7	2	5	4	6	2

Nett Births in the Year — Legitimate, 2202 ; Illegitimate, 144.  
 Nett Deaths in the Year of Legitimate Infants, 57; Illegitimate Infants, 4.

**SECTION B.****INFECTIOUS DISEASES****Diphtheria**

No cases of Diphtheria were notified during the year.

**Scarlet Fever**

49 cases of Scarlet Fever were notified during the year, as compared with 99 in the previous year. There were no deaths.

**Measles**

240 cases of Measles were notified as compared with last year's figure of 3,422. No deaths occurred from this cause.

**Whooping Cough**

23 cases of Whooping Cough were notified as compared with 42. There were no deaths.

**Acute Poliomyelitis**

No cases of Poliomyelitis were notified during the year.

**Acute Primary and Influenzal Pneumonia**

130 cases were notified as compared with 149. There were 93 deaths from this cause during the year, an increase of 1 as compared with 1961. Influenza accounted for 12 deaths as compared with 49 in the previous year.

**Dysentery**

60 cases of Dysentery were notified as compared with 24 during 1961.

**Food Poisoning**

26 cases of Food Poisoning were notified during the year.

**Ophthalmia Neonatorum**

No cases of Ophthalmia Neonatorum were notified during the year.

**Other Diseases**

3 cases of Erysipelas and 7 of Puerperal Pyrexia were notified during the year.



The following report has been supplied by Dr. J. N. Macartney, a Chest Physician of the Birmingham Regional Hospital Board, who is in charge of the Walsall Chest Clinic, which deals with cases of tuberculosis. Dr. Macartney is also responsible to the Walsall Council in all matters relating to environmental conditions of tuberculosis cases in the borough.

“Death rates per 1,000 population with comparative figures for England and Wales:—

WALSALL—

			1961	1962
Respiratory tuberculosis	...	...	0.152	0.067
Other forms of tuberculosis	...	...	0.017	0.017

ENGLAND AND WALES—

Respiratory tuberculosis	...	...	0.065	0.059
Other forms of tuberculosis	...	...	0.007	0.007

The local statistical data for tuberculosis corresponds with the general figures for England and Wales, and confirms that the control and elimination of this disease continues to progress steadily. For example, only one person under the age of 25 years died from tuberculosis in Walsall during 1962.

The generally satisfactory results of treatment are reflected in the ready acceptance of admission to Sanatorium where drug therapy can be initiated and stabilised while patients are rendered non-infectious.

Due to progress made in the control of tuberculosis, it has been possible to re-allocate approximately half the total bed complement at Goscote Hospital for the use of non-tuberculous diseases. There must be no slackening in the anti-tuberculosis campaign however, as the disease is still sufficiently serious to be a menace to health and happiness.”

### Venereal Diseases

The Venereal Diseases Clinic is situated at Manor Hospital, Walsall, the Hospital Management Committee being responsible for the work carried out at the Clinic.

We are, however, still concerned with the incidence of Venereal Diseases in the town and continue to work in close co-operation with the Venereologist.

The table on page 14 shows the work of the Venereal Diseases Clinic during the year.

### **Scabies Treatment**

The Scabies Clinic at Hatherton Road is still maintained and during the year the number of cases attending increased as compared with the previous year.

During the year 3 men, 14 women and 48 children received treatment, these cases making a total of 169 attendances for this purpose.

### **Cleansing of Persons**

Cleansing of unclean persons was carried out at the Cleansing Station at the Ambulance Station in Hatherton Road and during the year 37 persons were treated.

# CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1962

NOTIFIABLE DISEASE	CASES NOTIFIED IN WHOLE DISTRICT												TOTAL CASES NOTIFIED IN EACH WARD																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
	At All Ages	At Ages—Years											Bloxwich East	Bloxwich West	Leamore	Blakenall	Birchills	Hatherton	Paddock	Bridge	Pleck	Caldmore	Palfrey																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
		Under 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 25	25 to 35	35 to 45	45 to 65												65 and upwards																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
Small-Pox...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—





TABLE SHOWING THE WORK OF THE VENEREAL DISEASES CLINIC DURING THE YEAR 1962

	Syphilis		Gonorrhoea		Conditions other than Venereal		Totals		Totals
	M.	F.	M.	F.	M.	F.	M.	F.	
Number of cases on Register 1st January, 1962	30	46	76	9	60	106	166	161	327
Number of old cases returned for treatment or observation of same infection	—	1	—	—	—	—	—	1	1
Number of new cases dealt with for the first time	8	8	104	17	217	253	329	278	607
Number of new cases transferred from other centres	—	1	—	—	—	—	—	1	1
Total cases dealt with	38	56	180	26	277	359	495	441	936
Attendances—Medical examinations	212	229	590	128	871	779	1673	1136	2809
Irrigation, dressings	95	77	111	3	317	1378	523	1458	1981
Total attendances	307	306	701	131	1188	2157	2196	2594	4790
Number of new cases attending during 1962									
Walsall	12	89			285		386		386
Other areas	4	32			185		221		221
Pathological Work —			Microscopical		Cultural		Serum		Cerebro Spinal Fluid
Specimens examined at Walsall Treatment Centre			for Syphilis	Others			for Syphilis	Others	
Specimens examined at a Pathological Centre			78	2019	893		—	—	—
			—	—	—		629	629	—



## SECTION C.

**NATIONAL HEALTH SERVICE ACT, 1946**  
**CARE OF MOTHERS AND YOUNG CHILDREN**

Dr. I. M. Brown, Senior Medical Officer for Maternity and Child Welfare reports as follows upon the work of her section—

“I am pleased to report that our Maternity and Child Welfare Services have functioned efficiently throughout the year.

Rates in connection with mothers and young children were not very encouraging during 1962, both the infant deaths and still-births showing a marked increase over the previous year. We also suffered our first maternal death for four years. These factors serve as stark reminders that care of the expectant mother and infant is exceedingly important. The health services are doing everything possible to increase their efficiency but the people themselves must in turn help by taking advantage of them and by following the advice of the doctors and nurses. During the year there were 42 still-births in 41 patients, one set of twins being born dead. This is an increase of 11 as compared with 1961. My annual still-birth investigation shows that the age range of mothers having still-births varied from 16 years to 43 years, the greatest number (27) occurring between the ages of 20 and 30 years. 5 still-births occurred in domiciliary confinements, 22 in hospital booked cases, 9 in cases where patients were to be delivered at home but were transferred to hospital, 3 in maternity hospitals under the supervision of the patients general practitioner and 2 in emergency cases where no arrangements had been made for confinement. Prematurity and toxæmia accounted for half the cases of still-birth.

55 per cent. of the births in the borough to Walsall women were delivered by district midwives employed by the local authority, representing a total of 1,212 domiciliary births. In addition the nursing of 410 mothers discharged from maternity hospitals was carried out.

Relaxation and mothercraft classes at which instruction is given by nurses and midwives are progressing satisfactorily. These classes, together with the advice given at ante-natal and infant welfare clinics, provide invaluable information to expectant and nursing mothers. It must also be mentioned that an essential factor to ensure the well-being of the expectant mother is good co-operation between hospital, general practitioners and the local health authority, which continues to be forthcoming in Walsall.

The dental service for expectant and nursing mothers and children under five years of age is also much appreciated, and the number of women and children accepting treatment shows a tendency to increase.

Vaccination against smallpox and immunisation against whooping cough, diphtheria and poliomyelitis is available at all child welfare centres."

### Ante and Post-Natal Clinics

The following table shows the attendances at the authority's Ante-natal and Post-natal Clinics during the year:—

	Pool Street A. M.	Field Road A. M.	Coun- tess Street A. M.	Ida Road A. M.	Little- ton Street A. M.	Beech- dale A. M.	Dudleys Fields A. M.	Coal- pool A. M.	Total A. M.
Ante-natal Cases ...	463 310	933 712	964 773	352 274	667 562	296 243	416 345	415 367	4506 3586
Ante-natal New Cases ...	169	362	331	122	221	103	152	160	1620
Post-natal Cases ...	- -	- -	- -	- -	- -	- -	- -	- -	- -
Post-natal New Cases ...	-	-	-	-	-	-	-	-	-

A.—Attendances.

M.—Medical Examinations

### Child Welfare Centres

There are 9 Child Welfare Centres in Walsall at which twelve sessions are held weekly attended by a doctor and health visitors.

The Council's clinic building programme is progressing satisfactorily and at the time of writing the third post-war all-purpose clinic is functioning at Mossley. This clinic serves a long felt need and is greatly appreciated by the residents of the rapidly expanding Dudleys Fields and Mossley estates. Little Bloxwich Clinic is also in the process of erection and Ministry of Health sanction has been received to replace Field Road Clinic and for an additional clinic to serve the Delves area. Plans will shortly be commenced for the new Central Clinic, the most ambitious project in the building programme.

The following table shows attendances in age groups at Child Welfare Centres during the year:—

CENTRE	Under 6 months		6—12 months		1—2 years		2—5 years		Total		New Cases
	A.	M.	A.	M.	A.	M.	A.	M.	A.	M.	
Pool St.	1371	485	814	236	357	108	229	103	2771	932	225
F'ld Rd.	2106	480	1392	253	886	202	898	163	5282	1098	319
C'tess St.	2601	850	1462	427	680	170	633	114	5376	1561	366
Ida Rd.	1725	558	899	262	452	111	432	68	3508	999	227
L'ton St.	1284	299	579	161	152	34	75	40	2090	534	182
D'dley's Fields'	1204	344	679	170	257	70	196	98	2336	682	170
Beechdale	898	273	752	191	390	98	275	49	2315	611	90
Orchard Hills	431	182	329	71	196	45	105	35	1061	333	75
Coalpool	1318	339	822	131	471	93	646	102	3257	665	215
Totals	12938	3810	7728	1902	3841	931	3489	772	27996	7415	1869

A.—Attendances.

M.—Medical Examinations

### Provision of Foods

Various types of proprietary baby foods, National Dried Milk, orange juice and cod liver oil are available at all child welfare sessions, and part-time women are employed on the work of distribution. The following table shows the types and amounts of foods sold during the year:—

23,506 tins	Full Cream National Dried Milk.
19 tins	Half Cream National Dried Milk.
2,195 bottles	Cod Liver Oil.
2,808 pkts.	Vitamin Tablets.
18,038 bottles	Orange Juice.
4,376 lb.	Cow and Gate Dried Milk.
20,758 lb.	Ostermilk.
1,189 lb.	Trufood.
2,094 tins	S.M.A.
16 tins	Allergilac.
1,585 cartons	Virol
6,002 tins	Ovaltine
129 lb.	Maltoline.
1,839 pkts.	Farex.
923 pkts.	Scotts Cereal Infant Food.
257 pkts.	Groats.



413 pkts.	Robrex.
3,870 bottles	Rose Hip Syrup.
1,176 pkts.	Farleys Infant Food.
73 cartons	Marmite.
8,689 pkts.	Farleys Rusks.

### **Dental Treatment**

The Council's dental service provides for every expectant mother to be examined by a dental practitioner following her first attendance at an ante-natal clinic, for the periodic examination of children under the age of five years and for the necessary treatment to be provided where required, particular attention being paid to conservative treatment.

During the year 40 dental sessions were devoted to maternity and child welfare patients. 72 expectant and nursing mothers were examined and 64 were found to require treatment. 45 of these patients attended the Dental Clinic and at the end of the year 27 cases had completed their course of attendances. 8 complete dentures and 7 partial dentures were provided. 78 children under the age of 5 years were examined and 69 were found to need treatment. 69 were treated of whom 66 were made dentally fit.

### **Maternity Outfits**

Maternity outfits are distributed by municipal midwives to all expectant mothers confined at home and to mothers discharged from hospital before the tenth day after confinement, and during the year 1,454 outfits were issued.

### **Unmarried Mothers and Children**

The Walsall County Borough is a constituent authority of the Staffordshire County Council Scheme for the care of illegitimate children and their mothers.

31 cases in which illegitimate births occurred in 1962 have been dealt with by Sister Ellis and these are reported on below. In addition, 13 cases in which births occurred prior to 1962 were helped according to their various needs including placing babies for adoption, advice as to Affiliation proceedings, finding accommodation etc. 16 expectant mothers whose babies were due to be born in 1963 had the necessary plans made for their confinements. This makes a total of 60 cases under care during 1962.

14 mothers were accommodated in Diocesan Homes, remaining until their babies were aged two months, 14 went into hospital for confinement and 3 had their babies at home. 2 of the cases concerned married women, one being legally separated and one divorced.

Although every effort was made to trace and interview putative fathers only 4 Affiliation Orders and one private agreement were made. 2 girls married the fathers of their babies.

The ages of the mothers ranged between 15 and 34 and are listed as follows:—

Age 15—2, age 16—1, age 17—1, age 18—6, age 19—5, age 20—7, age 21—1, age 22/27—6, age 28/34—2.

The ages of the putative fathers ranged between 16 and 40.

The babies were placed as follows:—

13 with mothers at home,  
 4 with parents married,  
 2 with parents co-habiting,  
 1 with foster parents,  
 3 in Local Authority Homes,  
 2 in Voluntary Children's Homes,  
 5 adopted through the Association,  
 1 still-born.

In all cases we are satisfied that the children are receiving adequate care and attention.

437 visits have been paid in connection with the 60 cases under care. In addition, the homes of prospective adopters have been vetted and reported on, babies visited after placings have been made, girls conveyed to Homes and accompanied when they have had to appear in Court or to have their signatures witnessed when consenting to an Adoption Order being made.

### Day Nurseries

The following table shows the average attendance at the Nursery:—

No. on Register at 31.12.62	Total No. of attendances	Average daily attendance
20      ...	3,763      ...	15.0

### Premature Infants

Notifications were received in respect of 202 infants whose birth weight was  $5\frac{1}{2}$  lbs. or under, an increase of 16 over the previous year. In some cases the notifications applied to infants who, although the birth weight was  $5\frac{1}{2}$  lbs. or less, were really full-term, but these infants were given the same care as those prematurely born.

Of the 202 infants notified, 80 were born at home, 121 in hospital and 1 in a private nursing home. Eleven of the infants born at home were transferred to hospital. All of the 69 infants nursed entirely at home survived at the twenty-eighth day. Two of the eleven infants who were born at home and transferred to hospital died in the first 24 hours, and seven survived at the twenty-eighth day.



Seven of the 121 infants born in hospital died in the first 24 hours and 105 survived at the end of 28 days, and the one infant born in a private nursing home was transferred to hospital and died in the first 24 hours.

There were 23 notifications of premature still-births, 20 of these being born in hospital and 3 at home.

The hospital provision for the care of premature infants is adequate and premature infants are transferred to hospital whenever necessary. To those premature infants remaining at home special nursing care is given by midwives and by the health visitors.

## **MIDWIFERY SERVICE**

### **Staff**

The midwifery staff, which at the end of the year consisted of 1 Supervisor and 15 Midwives, is under the medical supervision of the Senior Medical Officer for Maternity and Child Welfare. Due to the increased number of early discharges from maternity hospitals it was necessary to continue to employ part-time nurses to carry out post-natal nursing duties and to relieve the already over-burdened full-time midwifery staff.

### **Work of the Municipal Midwives**

During the year municipal midwives attended 1,212 births, representing 55 per cent. of the total births to Walsall women occurring in the borough, and also 9 births to women not normally resident in Walsall. 731 births to Walsall women took place in Manor Hospital and 258 in Bloxwich Maternity Hospital. 150 births occurred outside the borough. 6,400 ante-natal visits and all necessary visits to 410 mothers discharged from maternity units before the tenth day after confinement were made during 1962.

All midwives are qualified to administer analgesics, and during the year six gas and air outfits were in use on 572 occasions, and four sets of Trilene analgesic apparatus were used on 279 occasions. Pethedine was administered to 597 patients.

### **Emergency Maternity Service**

Arrangements are in force for the services of an emergency team of doctors and nurses from Manor Hospital, with the necessary equipment, to attend complicated cases of labour on the district when required.

### **Pupil Midwives Training Scheme**

In co-operation with the Manor Hospital 19 pupils completed their district training in the department during 1962, and 14 were still in training at the end of the year. 7 of the domiciliary midwives are approved as teaching district midwives. The Deputy Medical Officer of Health gives a course of lectures in public health to pupil midwives in the hospital part of their training.

### **Refresher Courses**

Two Municipal Midwives attended an approved refresher course during the year.

**Domiciliary Midwifery Service—1962**  
(including Nursing Homes)

	Domiciliary Midwives	Midwives in Nursing Homes	Totals
No. of Midwives practising in the Borough at the end of 1962 (excluding Hospitals)—			
(a) Employed by the Council	1 Supervisor 15	—	16
(b) In private practice ...	—	—	—
	16	—	16
	Domiciliary Cases	Cases in Nursing Homes	Totals
No. of cases in the Borough attended by Midwives—			
(a) Employed by the Council—			
(i) Doctor present ...	117	—	117
(ii) Doctor not present ...	1097	—	1097
(b) In private practice—			
(i) Doctor present ...	—	—	—
(ii) Doctor not present ...	—	—	—
TOTALS { (i) Doctor present ...	117	—	117
{ (ii) Doctor not present ...	1097	—	1097

## HEALTH VISITING

### Staff

Walsall, in common with most industrial areas, cannot ever hope to have a fully staffed Health Visiting service. Even though we may recruit students our hopes of retaining them for a useful length of service are in most cases slight. The Health Committee have considered the position and as a result of their recommendations we have been able to offer higher uniform allowances and a reduced contract of service period in order to attract students.

### Work of the Health Visitors

Health visitors are required to undertake visitation for the purpose of general supervision in connection with the care of mothers and young children. The service has, however, extended from year to year and now covers the general care and the health education of the household as a whole, special attention being given to the care of old people. The work of the health visitor, therefore, covers not only the supervision and welfare of young children, but is concerned generally with the prevention of illness and care and after-care of all members of the family.

The table on page 24 gives details of health visiting and tuberculosis visiting during 1962.



## **Liaison Arrangements**

### **(a) With General Practitioners**

We agree whole-heartedly that it is a most desirable arrangement for health visitors to work with particular general medical practitioners or groups of practitioners, but unfortunately only one member of our health visiting staff actually works with a general practitioner in his surgery. We would certainly welcome approaches from general practitioners for the services of health visitors as it is obvious that both would benefit greatly by this arrangement. Whilst there is, and always has been, a good relationship between health visitors and general practitioners in Walsall a great improvement could be effected if health visitors were able to work with general practitioners whose surgeries were situated on their districts. Let us hope that this ideal arrangement is not too far distant.

### **(b) With Hospitals**

We have good liaison with the Walsall hospitals, health visitors being attached to various branches for collaborative work. By this means the health visitor gains information regarding patients which is invaluable to her in dealing with their cases on discharge from hospital. Weekly attendances are made by the health visiting staff at the Pædiatric Unit, Diabetic Clinic, Geriatric Unit and Chest Clinic.

As a part of their training, second and third year student nurses from the local hospitals are given two lectures by the Superintendent Health Visitor concerning the public health aspect of their course. Following upon these lectures the nurses are given practical instruction on the district, a feature which is most enlightening and much appreciated. Lectures are also given by the Superintendent Health Visitor to student nurses at the Preliminary Training School. There is good liaison between Psychiatric Social Workers at St. Matthew's Hospital and health visiting staff. A weekly visit is paid, as far as the staffing position allows, to consult with Psychiatric Social Workers and visit selected mental patients to offer help in any way required.

### **(c) Follow-up of Discharged Hospital Patients**

Written notices of discharge are received from hospitals in respect of children, giving date of discharge and diagnosis. Telephone calls are received from Almoners and Social Workers regarding any discharged patient requiring urgent follow-up action. The Health Visitors' regular attendance at hospital clinics enables them to obtain advance knowledge of discharge and the type of after-care required—



this is particularly useful in the case of diabetic patients and enables Health Visitors to give advice regarding diet and insulin therapy. The Council's staff of Geriatric Nurses deals with the after-care of old people on discharge from hospital. Prompt notification is received of the discharge of patients from mental hospitals, the after-care being dealt with by Health Visitors and Mental Welfare Officers.

### **Geriatric Nursing**

The three part-time Geriatric Nurses continued to carry out most useful work during the year. Many of the old folk are unaware of the facilities available to them, such as domestic help, meals on wheels, home nursing, etc., and the Geriatric Nurses are able to help and advise them in this respect. The old people look forward to the periodic visit of the nurses which help to alleviate their loneliness and give them a feeling that they are not forgotten.

In the course of their visits Geriatric Nurses give valuable advice regarding the prevention of accidents in the home. We find that personal contact with this section of the public is much more effective than posters and press publicity.

Health Visiting and Tuberculosis Visiting during 1962

HEALTH VISITORS											TUBER- CULOSIS VISITORS
Number of children under 5 years of age visited during year	Expectant Mothers		Children under 1 year of age		Children age 1 and under 2 years		Children age 2 but under 5 years		Tuberculous Households	Other Cases	Total number of families or households visited by Health Visitors
	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	Total Visits		
5,486	1,284	1,591 *143	2,260	8,530 *1,024	3,832 *146	6,215 *331	— —	8,803 *527	6,818	483 *107	

Figures marked with an asterisk are "No access" visits.

## HOME NURSING

### Staff

The home nursing staff at the end of 1962 consisted of one Superintendent, 12 full-time and 2 part-time nurses. The staff is still below establishment, but the additional use of cars has permitted the requirements of the service to be covered adequately.

### Work of the District Nurses

As is evidenced by the statistical table below, a large proportion, 64 per cent. in fact, of patients attended by district nurses were over 65 years of age. This illustrates the extent to which this service, together with other allied services such as the domestic help service, relieves pressure on hospital accommodation, particularly the geriatric wards. There is very little doubt that the important and arduous work of the district nurse will increase from year to year with the growth in the proportion of the aged population.

The West Midlands Training School for District Nurses has continued throughout 1962, one of the Council's clinics being used for theoretical training purposes.

### Cases attended and visits paid by Home Nursing Staff during 1962

	Medical	Surgical	Infectious Diseases	Tuber- culosis	Maternal Compli- cations	Others	Totals	Patients included in (2)-(7) who were 65 or over at the time of the first visit during the year (9)	Children included in (2)-(7) who were under 5 at the time of the first visit during the year (10)	Patients included in (2)-(7) who have had more than 24 visits during the year (11)
	(2)	(3)	(4)	(5)	(6)	(7)	(8)			
s	886	93	1	25	13	127	1,145	734	9	404
s	32,038	4,223	11	944	131	4,691	42,038	30,127	96	35,553

## VACCINATION AND IMMUNISATION

### Vaccination against Smallpox

Vaccination against smallpox is carried out at child welfare clinics or by general practitioners. During the year 6,563 primary vaccinations against smallpox were carried out, 1,418 by doctors at clinics and 5,145 by general practitioners. There were 3,504 successful re-vaccinations, 457 by the medical staff of the department and 3,047 by general practitioners, and 24 attempts at vaccination or re-vaccination proved unsuccessful.

A large number of adults were vaccinated or re-vaccinated during the recent national smallpox outbreak and a similar increase is also apparent in the other age groups. According to our records 10,067 vaccinations and re-vaccinations were carried out during 1962, as compared with 1,071 in 1961.

The following table shows the ages at vaccination and re-vaccination.

	Under 1 year	1 year	2—4 years	5—14 years	15 years and over	Total
Vaccinated ...	1,020	282	558	1,984	2,719	6,563
Re-vaccinated ...	—	3	65	579	2,857	3,504



### Immunisation against Diphtheria

Diphtheria immunisation is carried out at child welfare centres, day nurseries, school clinics and by general practitioners. Visits are also made to schools for the purpose of immunisation and the administration of booster doses. The following table shows the number of children immunised each year by age groups:—

Year immunised	Under 5	5-14	Total	No. of children given re-inforcing injection	Cases of Diphtheria notified
1962	1260	731	1991	1107	—
1961	1733	1356	3089	1327	—
1960	1581	1609	3190	2689	—
1959	1188	1261	2449	1365	—
1958	1094	111	1205	36	—
1957	1037	1294	2331	1158	—
1956	746	1140	1886	774	—
1955	822	988	1810	678	1
1954	856	1027	1883	795	—
1953	858	899	1757	879	—
1952	906	898	1804	1273	—
1951	825	888	1713	1228	2
1950	570	956	1526	1413	2
1949	1171	1167	2338	2111	3
1948	1224	1238	2462	4314	3
Total	15871	15563	31434	21147	11

It will be noted that during 1962, 1,260 children under the age of five years and 731 between five and 14 years were immunised and 1,107 were given a reinforcing injection. Of the total, 447 were immunised and 151 given reinforcing doses by general practitioners under the Authority's scheme, the remainder being immunised by the Local Authority's own doctors.

### Immunisation against Whooping Cough

The following table gives details of whooping cough immunisation carried out during 1962:—

Born in year:—	1962	1961	1960	1959	1958	1953-1957	1948-1952	Total
	447	717	39	22	8	4	1	1,238

Triple antigen was used in most of these cases. 438 were carried out by general practitioners, and 800 at child welfare centres.

### Vaccination against Poliomyelitis

The following table shows the number of persons vaccinated against poliomyelitis during 1962:—

				SALK VACCINE		
				Complete primary course	Third Injection (Booster)	Fourth Injection (Booster)
Children born in 1962	...	...	...	13	—	—
Children born in 1961	...	...	...	120	65	—
Children and young persons born in 1943—1960	...	...	...	123	938	35
Young persons born in 1933—1942	...	...	...	79	436	—
Others	...	...	...	90	801	—
				425	2,240	35

				ORAL VACCINE		
				Complete primary course	Third dose (Booster)	Fourth dose (Booster)
Children born in 1962	...	...	...	96	—	—
Children born in 1961	...	...	...	660	154	—
Children and young persons born in 1943—1960	...	...	...	410	3,075	1,672
Young persons born in 1933—1942	...	...	...	145	1,562	—
Others	...	...	...	194	3,135	—
				1,505	7,926	1,672

The third and fourth booster doses of oral vaccine were given to persons who had previously been immunised with Salk Vaccine. Persons who receive the primary course of three doses of oral vaccine do not, at present, require a booster dose.

The use of oral vaccine commenced in February, and the much simpler method of administration of this type of vaccine is very much appreciated by the children.

### B.C.G. Vaccination

B.C.G. vaccination is now a regular feature of the authority's vaccination and immunisation programme and is offered to all school children over the age of 13 years, including students attending the

Technical College. Skin tests are carried out by the Heaf Gun method and negative reactors are offered vaccination. Children with strongly positive skin tests are referred to the tuberculosis health visitor for investigation.

The following table shows the work done in connection with B.C.G. vaccination during the year:—

	under 14 years of age	14 years and upwards	Contact Scheme
Number skin-tested ... ..	2,081	—	597
Number found positive ... ..	422	—	241
Number found negative ... ..	1,510	—	321
Number vaccinated ... ..	1,510	—	318

## **AMBULANCE SERVICE**

### **Vehicles**

The fleet at the end of 1962 consisted of six ambulances and five sitting case vehicles. One new sitting case vehicle was delivered in April and two ambulances were disposed of in August. We are hoping by stages to build up a fleet of modern vehicles in our efforts to maintain the efficiency of the service.

### **Staff and Buildings**

The ambulance staff at the end of the year consisted of one Ambulance Supervisor, one Assistant Supervisor and 24 Ambulance Drivers, two of whom are women. All members of the staff have successfully passed the St. John examination and refresher courses are arranged as necessary.

Provision has been made in the Council's building programme for the erection of a new ambulance station. The present building, formerly a decontamination centre, whilst having served a useful purpose, is very much in need of replacement. The ambulance service is one which is always open to criticism as any lapses are likely to have serious consequences and everything possible is being done in Walsall to improve the service.

### **Work of the Ambulance Service**

There has been a further increase in the number of cases carried by Ambulance during the year, 41,958 being conveyed as against 38,502 in 1961. The mileage run during the year has also increased to 154,578 as against 153,138 in 1961. The following summary shows the work done during the year:—

Calls ... ..	38,444
Journeys ... ..	13,494
Cases ... ..	41,958
Mileage ... ..	154,578

The ambulance staff continue to be responsible for the conveyance of bodies to the mortuary at the request of the Borough Coroner.



# AMBULANCE SERVICE

The following table shows the work carried out during the year:—

Month	CALLS	JOURNEYS										CASES								MILEAGE			
		Illness		Emergency		Other		Abortive and Service		Midwives, Home Nurses, Anaesthesia Apparatus etc.		Illness				Emergency				Other		AMB.	S. C. A.
		AMB.	S. C. A.	AMB.	S. C. A.	AMB.	S. C. A.	AMB.	S. C. A.	AMB.	S. C. A.	AMBULANCE		S. C. A.	AMBULANCE		S. C. A.						
												Stretcher Cases	Sitting Cases		Stretcher Cases	Sitting Cases		Stretcher Cases	Sitting Cases	Stretcher Cases	Sitting Cases		
Jan.	3287	317	350	130	—	20	2	46	9	87	37	850	717	1650	135	—	20	—	2	7323	4735		
Feb.	3011	393	360	125	—	16	—	41	9	27	82	865	408	1771	130	—	16	—	—	5723	4866		
March	2845	327	537	146	—	11	8	40	12	63	39	562	603	2243	146	—	11	—	8	6774	6305		
April	2544	420	331	120	—	11	3	47	7	56	89	852	440	1551	129	—	11	—	3	5712	5865		
May	3842	500	545	137	—	12	—	40	17	39	80	724	911	2136	143	—	12	—	—	6902	7571		
June	3062	365	343	154	—	10	6	47	11	46	88	832	751	1439	159	—	10	—	6	7179	4851		
July	3632	412	384	137	—	12	—	48	11	37	87	576	826	2029	141	—	12	—	—	6450	7368		
Aug.	3248	355	333	153	—	12	5	31	16	7	116	832	721	1351	162	—	12	—	5	5501	7024		
Sept.	3368	319	439	140	—	18	—	41	9	91	66	844	368	2105	147	—	18	—	—	5723	7091		
Oct.	3510	358	463	125	—	21	—	47	5	62	79	816	827	2498	138	—	21	—	—	6584	8032		
Nov.	3169	369	488	140	—	25	—	38	8	48	81	819	984	2117	143	—	25	—	—	8356	7426		
Dec.	2926	307	427	153	—	37	—	35	11	41	89	801	721	1452	164	—	37	—	—	5388	5829		



## PREVENTION OF ILLNESS, CARE AND AFTER-CARE

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### Sick-Room Appliances Service

Sick-room appliances are available at the Ambulance Station for issue to patients on loan on the recommendation of the hospital, family doctor, district nurse or health visitor.

During the year the following articles were issued:—

Rubber Sheets ...	170	Walking Aids ...	4
Back Rests ...	173	Urinals ...	134
Feeding Cups ...	14	Sputum Cups ...	9
Crutches ...	12 prs.	Air Rings ...	161
Walking Sticks ...	30	Wheel Chairs ...	76
Bed Cradles ...	30	Bedpans ...	244
Bed Tables ...	6	Bed Boards ...	4
Commodes ...	56		

A small deposit is required for each article loaned out, which is refunded on the return of the article to the Ambulance Station.

### Milk Assistance Scheme

Under the Council's Milk Assistance Scheme a grant of free milk is issued by the department to tuberculous patients upon the certificate of the Chest Physician. Milk is supplied through the patient's own registered milk retailer so that the patient is not put to any trouble to obtain milk from a special source, a benefit appreciated by the patient. For varying periods during the year 5 patients suffering from tuberculosis were supplied with one pint of milk a day, free of charge. A close liaison with the Chest Physician continues and officers of the Chest Clinic and of this department confer regularly upon the needs of tuberculous patients. The Tuberculosis Health Visitor, who is actually employed by the local authority, has an office at the Chest Clinic and works with the Chest Physician and consequently obtains very useful information regarding patients which helps her later in environmental duties.

### Tuberculosis After-Care

The Tuberculosis After-Care Committee is responsible, on behalf of the Council, for certain aspects of the after-care of tuberculous patients and has recently extended its activities to cover other chest diseases. Extra assistance is provided by the Committee in the form of additional food, change of air, clothing, better home conditions, extra beds and bedding and patients are in some cases helped to find more suitable occupations. The Committee has functioned for many

years and has assisted a large number of patients. The Council makes a generous grant to assist the Committee in its work and funds are also derived from voluntary sources.

The Committee makes arrangements for practical help to patients where necessary and a very considerable sum is distributed as Christmas gifts to all patients on the books. The Committee is well served by its honorary officers who have a long tradition of service behind them. There is a helpful liaison between the voluntary body and the Health Department and this ensures active co-operation at all times.

### **Prevention of Break-up of Families**

The case load in this Section has remained numerically the same. The waiting list has increased to approximately 50.

The co-ordination with other departments, voluntary organisations and statutory bodies is well established and has widened considerably to include business firms, solicitors, prison welfare officers, social groups and individuals. It is now generally accepted that the welfare of the family unit is the prime consideration of the Section and that long-term work to prevent the children of the problem families from becoming the problem parents of the future is a vital and necessary job which has to be done.

The work which is being done with the children receives its approval and support from many areas. For the third year in succession arrangements have been made to send approximately 45 children on holiday to camps and private hostesses in a scheme sponsored by the Regional W.V.S. Youth hostelling expeditions, parties and outings have been arranged for these under-privileged children whose response to the interest shown in them is noticeable in the improvement in their anti-social behaviour. In 1962 only 2 of the 250 children under the Section's supervision appeared before the Juvenile Court. No family was prosecuted by the N.S.P.C.C. on any grounds.

Eviction has been prevented in a number of cases by the handling of budgeting, and negotiations with numerous firms, the Magistrates and County Courts have prevented prison sentences which would have resulted in loss of employment and the added expense to the community of having to support the family. Several cases have been dealt with on a short-term basis and closed as satisfactory.

During 1962, the Section dealt with 62 families and gave advice to a large number of casuals. During the year 18 new cases were opened and five cases were closed. An increased number of cases were assessed as a result of notification from the Housing Department of threatened eviction.



## Convalescent Treatment

Under the Council's convalescent treatment scheme arrangements are made to provide convalescent holidays for persons certified by hospitals or medical practitioners to require them.

During the year 28 children were sent on holidays for three weeks at the Ormerod Convalescent Home, St. Annes-on-Sea.

9 adults went for 2 weeks to convalescent homes at Blackpool, Southport, St. Annes, Exmouth and Clevedon and 3 mothers with young children went to Dodford Nursery Holiday Farm, near Bromsgrove.

The children's part of the scheme is run on similar lines to that operated by the Walsall Poor Children's Country Holiday Society and co-ordination of the two schemes is well established.

## Chiropody

Due to staffing difficulties we still experience considerable difficulty in meeting the heavy demands, particularly from elderly persons, for chiropody treatment. Renewed efforts to obtain the services of a full-time Chiropodist have been unsuccessful. There is, however, one bright spot on the not too distant horizon, which is the setting up of a training course for chiropodists at the Walsall and Staffordshire Technical College in September, 1963; this we hope will provide trained chiropodists interested in careers in local government. We hope that young people can be encouraged to take up this worthwhile profession in which there is plenty of scope, particularly when one looks at the demand for treatment under the local authority scheme.

The following are the attendances made for treatment during the year:—

Elderly persons	...	...	...	539
Physically-handicapped persons	...			22
Expectant mothers	...	...		1
				—
			Total	562
				—



## DOMESTIC HELP SERVICE

### Staff

At the end of the year the number of domestic helps employed was 12 full-time and 60 part-time. There is one full-time organiser.

### Work of the Domestic Helps

664 persons received help during 1962 of whom 480 (72%) were chronic sick, including aged and infirm. Confinement cases attended increased from 128 in 1961 to 135 in 1962. In spite of a large turnover of staff we have again managed to cope with the continuing demands on the service. As far as the elderly people are concerned, priority is given to bed-ridden patients to whom help is, of course, essential, the amount and frequency of help to other cases being assessed according to need. We can safely say that very few complaints are received and many relatives of recipients express their appreciation of the excellent service provided.

The following statistics show the work done by the domestic helps during the year:—

No. of Helps employed at 31st December, 1962 ...	72
(12 full-time, 60 part-time).	
No. of confinement cases at which help was supplied	135
No. of tuberculosis cases at which help was supplied	3
No. of chronic sick (including aged and infirm) cases at which help was supplied ... ..	480
No. of other cases at which help was supplied ...	46
Total hours worked at confinement cases ... ..	8,687
Total hours worked at tuberculosis cases ... ..	1,641
Total hours worked at other cases ... ..	73,446

## MENTAL HEALTH

### Organisation and Staff

The administration of the Mental Health Service under the Mental Health Act 1959, is carried out by the Health Committee with delegation to a special sub-committee.

The following is a list of staff employed in this service:—

General Medical Supervision	Medical Officer of Health.
	Deputy Medical Officer of Health.
Mental Welfare Officers ...	2 Senior Mental Welfare Officers.
	1 Mental Welfare Officer.
Training Centre ... ..	1 Supervisor.
	3 Assistants.
	1 Cook-Guide.

The after-care of patients discharged from mental hospitals is carried out by Mental Welfare Officers and Health Visiting staff.

During the year a series of observation visits was made by health visitors to St. Matthew's Hospital, which included sitting in on case conferences.

There is close co-operation with the Birmingham Regional Hospital Board and the Hospital Management Committee of St. Margaret's Hospital, and the advice and assistance of the officers of the Board and the Committee are freely available.

### **Approval of Medical Practitioners**

The following doctors are approved by this Local Health Authority under the Mental Health Act, 1959, to give medical recommendations for compulsory admission of mentally disordered persons to hospital or reception into Guardianship: —

Dr. T. Ross	...	...	Medical Officer of Health
Dr. G. P. A. Evans	...	...	Deputy Medical Officer of Health
Dr. I. M. Brown	...	...	Senior Assistant Medical Officer
Dr. G. M. Baker	...	...	General Practitioner
Dr. A. B. Davies	...	...	General Practitioner
Dr. L. A. Redlich	...	...	General Practitioner
Dr. P. G. H. T. Pollitt	...	...	General Practitioner
Dr. M. H. Bott	...	...	General Practitioner
Dr. E. R. S. Grice	...	...	General Practitioner
Dr. J. W. Tanner	...	...	General Practitioner

### **Admissions and After-care**

The following table shows the number of cases dealt with in 1962 under the Mental Health Act, 1959 by the Mental Welfare Officers: —

No. of Health Service patients removed to St. Matthew's Hospital, Burntwood, for observation or treatment	...	...	...	...	99
No. of Health Service cases, alleged to be suffering from mental disorder, investigated	...	...	...	...	70
No. of patients referred for after-care	...	...	...	...	214
No. of after-care visits paid	...	...	...	...	372
No. of miscellaneous visits made by the Mental Welfare Officers	...	...	...	...	284

### **Training Centres**

The Junior Training Centre, which was opened for the reception of pupils in September, 1962, has 75 places. At the end of the year there were 35 juniors and 28 seniors in attendance at the Centre. The curriculum of the Centre includes rug making, stool seating, embroidery, handicrafts, percussion band, eurhythmic, country dancing, puppetry, games and speech training.



Work will shortly commence on a new Adult Training Centre to be built on the same site as the Junior Centre. Senior pupils are at the moment accommodated in the Junior Centre, but will, of course, be transferred to the Adult Centre on completion. Thereafter we hope to effect a steady flow of seniors from the Junior to the Adult Training Centre year by year. Training will be given in carpentry, metal work and other trades, and it is hoped that local industries will co-operate by providing out-work. Our plan for the Adult Training Centre combines this purpose with that of a sheltered workshop to cater for the inevitable nucleus of patients who, despite years of training, will never be suitable for employment in open industry and will always remain under the supervision of the Local Health Authority.

### **Residential Accommodation**

We have no residential accommodation for subnormal patients at present. The Council's capital building programme includes a hostel for working subnormal patients. A hostel is also planned at a later date to accommodate elderly psychotics.

### **Social Club**

The Phoenix Club, a social club for patients discharged from mental hospitals, has continued to make a valuable contribution to the Council's mental health service. Our thanks are again due to members of the health visiting staff and voluntary workers, who have so willingly given of their own time to organise the activities. Efforts have again been made as far as possible to provide a varied programme to keep the interest of members and as will be seen from the following list of events, variety has certainly been provided:—

- Coach trip to Bridgnorth.
- Canal trip by barge.
- Outing to Trentham Gardens.
- Outing to Coventry Cathedral.
- Entertainment by Scottish Country Dancers.
- Ballroom dancing.
- Concert parties.
- Old Time dancing.

It is virtually impossible to enumerate other activities, which include film shows, socials, talks by members of various organisations etc. An important addition to the club's activities is a handicraft class for club members which was commenced during the year. Club members are given handicraft instruction by the health visiting staff and voluntary workers, the finished articles being sold for the benefit of club funds.

### **Mental Welfare Association**

The Senior Mental Welfare Officer is Secretary of the Mental Welfare Association and this officer is responsible for the work undertaken by the Association, which makes a useful voluntary contribution towards the Council's Mental Health Service.



Number of patients referred to Local Health Authority during year ended 31.12.62

Referred by	Subnormal				Severely Subnormal				Totals			
	Under Age 16		16 years and over		Under Age 16		16 years and over		Under Age 16		16 years and over	
	M	F	M	F	M	F	M	F	M	F	M	F
General Practitioners ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Hospitals, on discharge from in-patient treatment	—	—	3	3	1	—	—	—	1	—	3	3
Hospitals, after or during out-patient or day treatment ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Local Education Authorities ... ..	1	1	14	10	6	3	—	—	7	4	14	10
Police and Courts ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Other Sources ... ..	—	—	1	—	—	—	—	—	—	—	1	—
TOTAL ...	1	1	18	13	7	3	—	—	8	4	18	13

# MENTAL HEALTH ACT, 1959

	Subnormal				Severely Subnormal				Totals			
	Under Age 16		16 years and over		Under Age 16		16 years and over		Under Age 16		16 years and over	
	M	F	M	F	M	F	M	F	M	F	M	F
1. Admission to Guardianship of L.H.A. or other Guardian during the year ended 31.12.62 ...	—	—	—	—	—	—	—	—	—	—	—	—
2. Total number under Guardianship at 31.12.62												
L.H.A.     ...     ...     ...	—	—	2	1	—	—	—	—	—	—	2	1
Other     ...     ...     ...	—	—	—	—	—	—	—	—	—	—	—	—
3. Receiving training or occupation in day centre	—	—	—	—	—	—	—	—	—	—	—	—
Awaiting training or occupation in day centre	—	—	—	—	—	—	—	—	—	—	—	—
4. Receiving home visits	8	2	101	77	—	—	—	—	—	—	—	—
Statutory     ...												
Voluntary     ...	1	—	222	235	—	—	—	—	—	—	—	—
5. Number of patients in L.H.A. area on waiting list for admission to hospital at 31.12.62												
(a) In urgent need of hospital care ...	—	—	1	1	—	—	3	—	3	—	3	1
(b) Not in urgent need of hospital care	—	—	—	—	—	—	—	—	—	—	—	—
6. Number of patients admitted temporarily for residential care during 1962.												
(a) To N.H.S. hospitals     ...     ...	—	—	—	—	—	—	1	2	1	2	—	2
(b) Elsewhere     ...     ...     ...	—	—	—	—	—	—	6	1	6	1	—	—

## SECTION D. MISCELLANEOUS

### Health Education

An intensive programme of health education by means of posters, press notices, lectures and talks to various groups has continued throughout the year. Wide publicity has been given by these means to all types of vaccination and immunisation and by personal contact by members of our medical, health visiting, midwifery and nursing staffs.

I have referred to "Smoking and Health" in the health education paragraph of my annual report on the school health service, which I think is the more appropriate section. Our main health education campaign in this respect should be aimed at senior school children, and this has been done in Walsall. Early in the year we took advantage of the Central Council for Health Education team of lecturer/demonstrators who visited several Walsall senior schools to talk to senior pupils on the hazards to health of smoking. Talks, illustrated by films, have also been given on the subject by the Council's doctors and nursing staff. The opportunity to put over our views to parents is also taken at school medical inspections.

Requests from various organisations for members of the medical and nursing staff to give talks on the work of the department have been complied with. Lectures were given to Rangers on home safety and personal hygiene to assist them in connection with the Duke of Edinburgh's Award. Talks were given by the Superintendent Health Visitor and members of the health visiting staff, to a number of organisations on various aspects of public health and the services which are available to the general public, and according to reports from the lecturers, the information was obviously well received. It is surprising to learn that many of the general public are ignorant of the services provided by the health department and these talks are a very effective means of spreading the news.

Mothercraft classes were continued for young mothers expecting their first babies, a course of seven lectures being given by health visiting and midwifery staff. The lectures cover all aspects of ante-natal care, preparation for confinement and care of mother and baby. The final session of the course is devoted to a fathercraft class, which is quite well attended and provides means of educating young fathers in the care of mother and baby. During the year 303 expectant mothers made 1,253 attendances at mothercraft classes.

Mothercraft and hygiene lectures were continued at schools and during 1962, 9 classes were held and 93 lectures given. As in the previous year 1 secondary modern school had a variation of its mothercraft teaching, more emphasis being placed on the practical side. The pupils not only watched a demonstration of baby bathing, making a feed, sterilisation of equipment, making up a cot etc., but were given the opportunity to carry out these duties themselves under supervision. The examination at the end of the course of lectures



has been practical as well as theoretical. Many girls do exceptionally well and obviously enjoy this innovation as indicated by the fact that 141 first class and 78 second class mothercraft certificates were awarded to senior school girls.

It is felt that both the theoretical and the practical side of this type of health education should be given in every secondary modern school in the town, but it is a luxury which the continued acute shortage of health visitors makes impossible.

The Health Department has its own film projector and from time to time suitable films are shown during the course of lectures, there being a number of useful films available for this purpose. The officers concerned, medical and nursing staff in particular, often give freely of their own time for these lectures, and thanks are due to these officers for their enthusiasm and concern for this aspect of our work.

### **Nursing Homes**

At the end of the year there were no nursing homes registered under the Public Health Act, 1936.

The registration of one Home for Disabled and Old Persons, registered under the National Assistance Act, 1948 was cancelled in February, 1962.

### **Medical Examinations**

The medical staff of the health department carry out medical examinations on behalf of the various corporation departments on candidates for admission to the superannuation scheme and also act as medical examiners in cases where corporation employees are reported to be medically unfit to continue in the Council's service.

The following table shows the number of medical examinations carried out during the year:—

Transport Department ...	...	...	...	...	261
Education Department	...	...	...	...	71
Public Works Department	...	...	...	...	68
Health Department	...	...	...	...	40
Housing Department	...	...	...	...	24
Children Department	...	...	...	...	4
Town Clerk's Department	...	...	...	...	6
Borough Treasurers Department	...	...	...	...	11
Fire Department	...	...	...	...	14
Baths, Parks and Cemeteries Department	...	...	...	...	44
Welfare Department	...	...	...	...	5
Police Department	...	...	...	...	8
Public Libraries	...	...	...	...	8
Weights and Measures Department	...	...	...	...	1
Workshops for the Blind	...	...	...	...	1
Civil Defence Department	...	...	...	...	2
Magistrates Clerk's Office	...	...	...	...	1

### **Pathological Examinations**

The arrangement for the examination of pathological and bacteriological specimens by the National Laboratories Service has continued throughout the year. The laboratory, situated at Stafford is directed by the Medical Research Council for the Ministry of Health, and the service is a complete one covering all our possible requirements.

The medical staff of the Health Department send specimens for examination regularly and the service is also open to any of the local medical practitioners. The bacteriological examination of milk and other specimens is also carried out.

### **National Assistance Act, 1948, Section 47**

This section provides for the compulsory removal of persons in need of care and attention. No action was necessary during the year.

### **Cremation**

The Medical Officer of Health is the Medical Referee to the Walsall Corporation under the regulations made in pursuance of the Cremation Act, 1902, and is responsible to the Corporation for the final authority to cremate.

During 1962 certificates were given in respect of 463 deaths of persons who had resided in Walsall, and 333 in respect of persons who had resided outside the Borough, a total of 796.

As it is not always possible for the Medical Officer of Health to be present on all occasions when authority to cremate is required, authority was requested for the appointment of deputies to act in his absence, and the Deputy Medical Officer of Health and the Senior Medical Officer for Maternity and Child Welfare have been appointed Approved Deputies by the Council with the sanction of the Home Office.

### **Nurseries and Child-Minders**

The Nurseries and Child-Minders Regulation Act, 1948 provides for the registration of nurseries and child-minders, where children numbering more than two and who come from more than one household are cared for. The Act does not apply to the care of children by relatives.

Two persons were registered as child-minders during the year.

### **Blind Persons**

The care of blind persons is a function of the Welfare Committee in Walsall, and they work in close conjunction with the Walsall, Wednesbury and District Society for the Blind. There is a modern institution and workshops for the blind in the town and the facilities and care provided are of the best.

At the end of 1962 there were 249 Walsall residents on the register for the blind and 35 on the register for the partially-sighted.



## COUNTY BOROUGH OF WALSALL

**ANNUAL REPORT**  
 OF THE  
**Chief Public Health Inspector**  
 ON THE  
**Work of the Public Health Inspectors**  
 for the year ended 31st December, 1962

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE COUNTY  
BOROUGH OF WALSALL.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present on behalf of the late Mr. C. A. Stansbury, O.B.E., the Annual Report of the Chief Public Health Inspector on the work of the public health inspectors in the Borough during 1962.

Mr. Stansbury died on the 8th April, 1963, after a very brief illness. The suddenness of Mr. Stansbury's death emphasised how much his personality and grasp of affairs would be missed, not only locally in Walsall, but also nationally, for in both spheres of public health work he was a well known and respected figure. No doubt next year's report will contain a fuller appreciation of Mr. Stansbury's thirty-five years with the Corporation.

The death of Mr. Stansbury occurred before he had written his usual introduction to the Annual Report, and before he had personally scrutinised much of the material prepared for the Report.

I wish to place on record the assistance received from the Specialist Inspectors and the Senior District Inspectors in the preparation of this report.

Yours obediently,

J. P. BARTON,

Deputy Chief Public Health Inspector.

### PART I—ADMINISTRATION

In the Annual Report for 1961 it was stated that for the first time for many years the department had practically its full establishment of public health inspectors. It is with regret that it is reported that this position rapidly deteriorated in 1962, with the result that this year has been one of considerable difficulty with staffing problems and uncompleted work.



On 28th February, 1962 Mr. A. J. Cooper, a pupil public health inspector, resigned to take up an appointment as an architectural assistant with an adjoining authority. Mr. J. Fairless and Mr. F. Coldrick, specialist public health inspectors engaged on meat inspection, resigned on 31st March, 1962 and 8th April, 1962 respectively.

The staffing position improved when Mr. P. W. Tibbetts, a pupil public health inspector, qualified on 24th May, 1962 and was appointed to one of the vacant posts of district public health inspector. On 13th December, 1962 Mr. Tibbetts obtained his Diploma in the Inspection of Meat and Other Foods.

The vacant post of pupil public health inspector was filled by Mr. R. F. James, who was appointed on 24th September, 1962 to commence his four years training period.

### **Staffing.**

For some months during the early part of 1962 an attempt was made to maintain the high standards of meat inspection which have long formed part of the reputation of the department. The two vacancies on the meat inspection staff were filled by a rota of certain district and specialist inspectors possessing a meat inspector's diploma. By this system reasonable standards of meat inspection were operated but serious difficulties were caused in other sections of the department. In particular, the proper investigation of complaints was neglected, whilst both the slum clearance and smoke control programmes were severely hampered. Sickness amongst the staff added further difficulties and brought about the position where a decision had to be taken to cut down the standard of meat inspection provided. The rota of inspectors was discontinued and the permanent meat inspection staff on duty at the abattoir was reduced to the Senior Meat Inspector with the assistance of a trainee inspector. In these circumstances the Health Committee agreed to the discontinuance of the meat marking scheme, whereby carcasses of meat are stamped to indicate inspection at an approved standard.

Advertisements to fill the vacancies in the department met with no response. The Council recognised the seriousness of the situation and agreed to a regrading of the posts of meat inspectors and district public health inspectors. Towards the end of the year posts were advertised on the new gradings and a number of applications was received. Arrangements were made to interview a short list drawn from these applicants early in 1963 and it is hoped that the ensuing year will show an improved staffing position.

### **Re-organisation.**

The year 1962 also saw the acceptance by the Council of proposals for the re-organisation of the public health inspectorate.

Before the war and in the immediate post war period it was the practice to place an experienced inspector in charge of a particular district of the town, with responsibility for all the work of a public health inspector in that district. With the growing pressure and complexity of the work the situation arose where no single inspector could keep abreast of all aspects of the work and deal with all matters for a particular part of the town. There was also a shortage of experienced inspectors and it was impracticable to put a newly qualified inspector in complete charge of a district.

In these circumstances it became necessary in 1948 to introduce a degree of specialisation in the main fields of meat inspection, food and drugs work, housing, and atmospheric pollution, with the remainder of the work handled by district inspectors.

The soundness of this policy of a combination of specialisation and district inspection has proved itself over the last few years in the quality and uniformity of the work produced. This policy has formed the basis for the re-organisation of the public health inspectorate during 1962.

In a report laid before the Health Committee in February, 1962 it was pointed out that the post war period had seen eleven major Acts of Parliament and over 30 Regulations directly affecting the work of the public health inspector. Attention was drawn to the continuing shortage of experienced inspectors in the department. Reference was also made to the provision of additional transport and the use of lay assistance for routine duties.

The majority of the recommendations in the Report were accepted by the Council and have been put into effect during the last year.

The general work of the public health inspectorate is now carried out in five divisions, as shown below. Each division of the work is the special responsibility of a senior or specialist inspector.

**Meat and Food.**—Inspection at time of slaughter. Supervision of slaughtering. Inspection of meat premises and vehicles. Enforcement of Diseases of Animals Acts relating to contagious outbreaks.

**Food and Drugs.**—Sampling of food, drugs, water, fertilisers, feeding stuffs, and filling materials. Control of labelling and marking. Supervision of special food processes and enquiries. Pharmacy and Poisons licences.

**Housing.**—Clearance and closure of unfit houses. Advice relating to "life" of houses. Improvement grants.



**Atmospheric Pollution and Factories.** Control of industrial smoke, fume, grit and noise. Domestic smoke control areas. Inspection of factories.

**District Inspection.** Investigation of complaints. Welfare provisions in shops, factories and offices. Caravan site licensing. Licensing of pet shops and hairdressers. Inspection of food premises and food hygiene work. Certificates of Disrepair, Houses in multiple occupation. Other miscellaneous duties.

### **Office accommodation.**

The past year has also seen the transfer of the public health inspectorate to new office accommodation. For several years work has been hampered by inadequate offices and the lack of suitable facilities for interviewing the public. The siting of the former offices on the top floor of the Council House also led to complaints from members of the public, who found the offices difficult of access.

The former slipper bath building in Darwall Street has now been converted into a compact suite of offices, providing convenient facilities for the public at street level. The offices, although small in area, allow a much more satisfactory grouping of staff according to the various divisions of work, and have given a more efficient use of staff. It has, however, been necessary to transfer the food and drugs section and the inspector concerned to the meat inspectors office in Shortacre Street.

The sub-office opened last year at the Bloxwich Depot continues to operate satisfactorily and provides a readily available service to Bloxwich residents.

During the course of the removal to the new offices in Darwall Street the opportunity was taken to overhaul the existing filing and recording system, using the latest equipment for this purpose. It is hoped that the benefits of this re-organisation will be felt during the ensuing year.

### **New Legislation.**

The output of new legislation and official directives continued. Many of the orders and circulars received are concerned merely with administrative changes, or amendments of existing law, but two circulars have brought an increase of work to the department—that dealing with the improvement of houses area by area, and that dealing with houses in multiple occupation. The effect of these circulars and other changes in policy or legislation are dealt with in the particular sections of the report which follow.



## PART 2—HOUSING

### (a) Defects and Disrepair to Houses

The later sections of the report refer to action under the Housing Acts to secure the demolition, closure or major improvement of houses. This section of the report refers to action to secure the maintenance and repair of houses under the provisions of the Public Health Act or Walsall Corporation Acts, following the receipt of complaints by members of the public.

During the year 620 houses were repaired as the result of informal or formal notices issued by the department. Many of these notices refer to work of an urgent nature and considerable use continues to be made of the provisions of Sec. 50 of the Walsall Corporation Act, 1954 under which prompt action can be taken to secure the repair of houses. During the year 203 notices under Sec. 50 were served upon owners, this being almost double the number of Sec. 50 notices served during 1961. In 41 cases the work required by the notices was done in default of the owners by the Corporation.

In 73 cases the powers of Sec. 44 of the Walsall Corporation Act, 1954 were used to secure the clearance of stopped drains. In 40 cases the work was carried out in default of the owners by the Corporation and the costs recovered. Choked public sewers serving 445 dwellinghouses were cleared by the Corporation; a sum of about £400 was recovered from the owners involved for the cost of this work.

Towards the end of the year a report was being prepared for the Health Committee setting out the cost of recovering numerous small amounts for drainage work, with particular reference to the time involved in the preparation of the requisite statutory notices. The question of employing a workman to carry out drain clearances free of charge was under consideration.

### (b) Rent Act

During 1962 eleven applications were received by tenants of private houses for Certificates of Disrepair under the provisions of the Rent Act, 1957 and in six cases the appropriate Certificates were issued. Two applications were received for cancellation of Certificates and one cancellation was approved. The figures for any particular year do not balance because of the time lag in procedure.

### (c) Unfit Houses

408 houses were reported to the Health Committee for action, either in clearance areas or individually.

#### Clearance Areas.

The fifteen new clearance areas, which are set out below, were represented and involved a total of 278 houses.

- |  |            |
|--|------------|
| 1. The Walsall (Paddock No. 1) Clearance Area, 1962              | 168 houses |
| 2. The       ,,       (Paddock No. 2)       ,,       ,,       ,, | 5       ,, |

3.	The Walsall (Paddock No. 3) Clearance Area, 1962	2 houses
4.	The „ (Paddock No. 4) „ „ „	2 „
5.	The „ (Paddock No. 5) „ „ „	6 „
6.	The „ (Paddock No. 6) „ „ „	2 „
7.	The „ (Paddock No. 7) „ „ „	3 „

These areas were represented on the 26th Sept., 1962 and involve most of the houses in Paddock Lane, Tantarra Street, Tantarra Walk, Balls Hill, and parts of Union Street and Bott Lane. The method to be adopted in clearing the site was still under consideration by the appropriate Committee, at the end of the year.

8.	The Walsall (Church Street No. 1) Clearance Area, 1963	32 „
9.	The Walsall (Church Street No. 2) 1963	5 „
10.	The Walsall (Church Street No. 3) 1963	18 „
11.	The Walsall (Field Road No. 1) Clearance Area, 1963	7 „
12.	The „ (Field Road No. 2) „ „ „	12 „
13.	The „ (Field Road No. 3) „ „ „	6 „

Although these areas are dated 1963 they were represented on 20th December, 1962 and included most of the remaining houses in Church Street, Bloxwich, from Nos. 41 on the left hand side and 50 on the right hand side facing towards Field Road, and most of the houses in Field Road, Bloxwich on the left hand side from Church Street to Harrison Street.

14.	The Walsall (Queen Mary Street No. 1) Clearance Area, 1963	4 „
15.	The Walsall (Queen Mary Street No. 2) Clearance Area, 1963	6 „

These areas are dated 1963 but were represented on 20th December, 1962.

### Individual Houses.

In addition to houses dealt with in Clearance Areas a number of individual properties were dealt with under Sections 16 and 17 of the Housing Acts with a view to closure or demolition. Demolition or Closing Orders were made in respect of 31 houses. 79 Corporation owned houses were considered to be unfit and the tenants were rehoused prior to demolition taking place.



## Orders and Enquiries.

As a result of Clearance Areas declared in the previous year three Orders were made and two enquiries held as follows:—

1. THE WALSALL (PLECK) COMPULSORY PURCHASE ORDER, 1962—211 houses.

This Order combined the Walsall (Pleck Nos. 1 to 5) Clearance Areas and a certain amount of other property was included in the order to secure a piece of land which could be advantageously developed. The order was made on 16th April, 1962. It was intended in representing this area to rehouse the tenants within the Pleck Ward but owing to a series of unfortunate setbacks 23 months elapsed between the time the area was declared and the enquiry held. Confirmation had still not been received at the end of the year. This delay has jeopardised the rehousing within the Pleck Area and this will now only be achieved by the redevelopment of the site in sections and rehousing by stages. This may mean that householders wishing to remain in Pleck will have to wait for rebuilding to take place.

Two enquiries were held on the 11th September, 1962 and 18th December, 1962. Unfortunately, Mr. B. J. Fleming, A.R.I.B.A., the Ministry of Housing and Local Government Inspector who held the first enquiry, fell ill before he was able to make his report. This necessitated a second enquiry which was held by Mr. L. Howell, M.C., A.R.I.C.S. Both enquiries created a great deal of interest and a large number of objections to the Corporation's proposals was lodged.

2. THE WALSALL (NEW STREET, BLOXWICH) COMPULSORY PURCHASE ORDER, 1962—7 houses.

This Order was also delayed for the same reason as in the previous case, the enquiries being held by the same inspectors. Confirmation was still awaited at the end of the year.

3. THE WALSALL (BLUE LANE WEST) CLEARANCE ORDER, 1962—14 houses.

The houses contained in this order were previously included in the Walsall (Margaret Street) Clearance Order, 1961. The second order was requested by the Minister after a printer's error resulted in certain omissions from the first order. The order was made on 17th September, 1962.

Clearance Orders and Compulsory Purchase Orders commenced in previous years were confirmed as follows:—

1. THE WALSALL (WHITEHOUSE STREET) (PART III) COMPULSORY PURCHASE ORDER, 1961—36 houses.

This order was confirmed on 14th November, 1962 without modifications, although a Part V order running in conjunction with it, and involving a number of fit houses, was modified considerably.



2. THE WALSALL (MARGARET STREET) CLEARANCE ORDER, 1961—61 houses.

This order was confirmed on 7th August, 1962 subject to a number of well maintained payments being made and that the 14 houses in Blue Lane West were made the subject of a further order, as referred to earlier.

3. THE WALSALL (STATION STREET, BLOXWICH) COMPULSORY PURCHASE ORDER, 1961—12 houses.

The order was confirmed on 13th February, 1962 without modification.

**Families rehoused and houses demolished.**

During the year 220 families were rehoused from 212 houses. 146 houses were demolished and the total number of persons moved was 672.

At the 31st December, 1962 157 condemned houses were still in occupation.

The total number of houses still in occupation and included in both confirmed and unconfirmed orders is 679. This figure includes all houses which have been newly represented during the year and all those represented in previous years which are still occupied.

**Summary.**

The summary below sets out in detail the progress made during the year in the clearance of unfit properties.

Condemned houses still in occupation at 1st January, 1962	155
Houses represented with a view to the making of demolition or closing orders ... ..	51
Certificates of Unfitness issued by Medical Officer of Health in respect of Council owned properties ... ..	79
Houses represented in Clearance Areas ... ..	278
Condemned houses vacated ... ..	212
Condemned houses demolished ... ..	146
Condemned houses still occupied at 31st December, 1962	157

The progressive total of houses dealt with since 1930 under the slum clearance programme is summarised as follows:—

Houses represented as unfit ... ..	4,993
Houses demolished or closed ... ..	5,602
Approximate number of persons displaced ... ..	19,616

## New Houses.

During 1962 new houses in Walsall were provided by the following undertakers:—

(a) Walsall Corporation	...	...	...	...	507
(b) Private Persons	(i) Permanent houses	...	...		299
	(ii) New dwellings created by conversion of existing properties	...			18

### (d) Improvement Grants

The number of grants dealt with has remained fairly constant during the last few years. The summary below sets out the position with regard to the number of discretionary and standard grants dealt with during 1962.

Number of enquiries received	...	...	...	...	238
			Discretionary Grants	Standard Grants	
Applications considered	...	...	120	...	70
Applications approved	...	...	118	...	70
Total cost of all grants approved during the year:—					
Discretionary Grants	...	...	£20,674	8	9
Standard Grants	...	...	£9,530	0	0

During the year Circular 52/62 of the Ministry of Housing and Local Government was received. This circular asks local authorities to encourage the systematic improvement of houses street by street, or area by area. As the Circular states, this proposal entails a great deal of work. It requires the selection of a suitable area and the giving of a full explanation to all tenants and owners involved. Guidance would need to be given concerning the manner in which improvements could be made, with an indication of the probable cost or additional rent to be charged.

With the prevailing staff shortages, and the pressure of work upon the department, it has not been possible to make a start on this work, although it is hoped to approach the owners and tenants of a selected area in the course of the next year.

### (e) Houses in Multiple Occupation

The Housing Act, 1961 came into force in November, 1961, but it was not until the end of May, 1962, when the Housing (Management of Houses in Multiple Occupation) Regulations 1962 came into being, that the Act could be properly operated. Circular 16/62 of the Ministry of Housing and Local Government sets out in considerable detail the varied manner in which the Regulations are to be applied.



In April a Senior District Public Health Inspector was given special responsibility for Houses-in-Multiple Occupation and during the year 280 visits have been made. Out of this total number of visits, only 102 houses were fully inspected, due to the inability to gain access to houses for a variety of reasons. Many of these inspections have been made only by visiting the premises during the evening.

The main problems found arose in houses accommodating families, rather than single persons. In these houses there was a lack of suitable sanitary, washing and cooking facilities. There is also a problem of refuse disposal in houses occupied by immigrants, which still persists even when sufficient dustbins are provided.

Much of the work of enforcing the provisions of the Act has been by verbal notice and advice (as advocated by the Minister). It has been, of necessity, a protracted operation due to language difficulties and lack of understanding of our accepted standards.

A Management Order made under Section 13 of the Act and a Direction Order made under Section 19 of the Act were made in one extremely bad case and had immediate results.

The survey of all the Houses in Multiple Occupation in the Borough was not completed during the year due to pressure of other work, shortage of staff due to sickness, and absence of district inspectors on meat inspection.

The number of immigrants who form the majority of the occupants of these houses has not increased during the year, due it seems to the introduction of the Immigration Act and the outgoing of Indians during the Indian-Chinese border dispute, but much work remains to be done both in the enforcement of the Act and the education of the immigrants to our standards of hygiene.

It is hoped to present a full report on the letting of houses in multiple occupation to the Health Committee in the coming year.

### **PART 3—CARAVANS**

#### **(a) Caravan Sites**

One application was made during the year for a licence authorising land to be used as a Caravan Site, and one application was made for the renewal of a licence. Both applications were granted.

There are now 12 licensed sites in the Borough. Letters were forwarded to all licence holders informing them of the need to comply strictly with the schedule of conditions in their licences, and inspections were carried out to determine whether these conditions were being observed. Several works of improvement were carried out during the year, including the provision of fire fighting equipment in accordance with the recommendations of the Chief Fire Officer.



### (b) Itinerant Caravans

During the year there has been continued movement of caravans on and off land in various parts of the Borough. The land adjoining Bloxwich Lane extending from Bentley Lane to Wolverhampton Road, Walsall, has been frequently used, but land in Brewer Street, Adams Street, the car park in Green Lane, and the fairground in Corporation Street, have all received visits from itinerant caravan dwellers.

Another site in Cartbridge Crescent was made inaccessible to caravans by the erection of barriers during the latter part of the year. Unfortunately, the same practice cannot be always followed for all the sites—as, for example, in the case of car parks. The complaints of nearby residents are the same as those received in previous years. In a few instances the caravans are quite well fitted, but most of them are squalid. Irrespective of the type of caravan, there is the inevitable lack of drainage, sanitary accommodation, water supply and refuse disposal facilities. These, together with noise and litter, gives rise to objection and justifiable complaints from nearby residents. As a final source of annoyance, the local residents are pestered by frequent requests for water.

The caravans used are of the mobile type drawn by motor vans or lorries. The lorries are used for trading in scrap metal and old rags; the chosen site from which operations are conducted being used as dumping and sorting out base. Any article which is of no saleable value is left on the site as litter. Frequently fires are made to separate metals from unwanted components such as plastics or wood, with a resulting nuisance from smoke and burnt out debris.

In only rare instances do any of these itinerant van dwellers resemble at all the popular conception of a gypsy, and the gypsy mode of life. The provision of licensed caravan sites would not seem to be the answer to the problem, since very few of these caravan dwellers have shown any wish to observe the ordinary rules of social behaviour.

The procedure adopted in removing the vans involves first a visit by an Inspector followed by a visit with the Police, whereon the van occupants are instructed to move the same day. If they fail to do so, they are towed on to the highway by a vehicle with two workmen from the Public Works Depot. In many instances the same vans return to the same sites or elsewhere in the Borough within a very short time, and the whole procedure has to be repeated. In some cases the procedure proves effective in the first instance and the caravans move out of the Borough. During the very bad winter period, cases of sickness, with bad road conditions, prolonged the stay of the vans in the Borough.

The increasing tendency now is for vans to park in and near the town centre due to the decrease in space available elsewhere because of development. The large slum areas now being cleared in the town afford easy access and standing for vehicles and vans.

Wherever possible on all Corporation owned land, barriers are created to prevent vans gaining access to prevent not only a nuisance, but also to save the considerable amount of time spent annually on this work.

The number of visits made by Inspectors from the department during the year was 785 and the time spent would amount to a total of about  $3\frac{1}{2}$  months of an inspector's time.

## **PART 4—FOOD**

### **(a) Slaughtering Facilities**

As reported last year, the Minister of Agriculture, Fisheries and Food, in accepting the Council's report on the existing and probable future slaughterhouse requirements of the district, laid down the 1st January, 1963 as the day by which all slaughterhouses in the district must comply with modern standards relating to hygiene and the prevention of cruelty. During the course of 1962 various plans for the improvement of the existing slaughterhouses in Shortacre Street were considered but none was found to be entirely acceptable. It eventually became apparent that it would be impossible to put the slaughterhouses in order before the appointed day and an application was made to the Minister for the appointment of a later day.

The Minister agreed to the appointment of the 1st January, 1964 as this later day, but has indicated that no further extension of time can be granted.

### **(b) Inspection of Meat**

#### **General Review.**

Reference has already been made to the resignation, in the early part of the year, of two of the staff of three public health inspectors engaged on full time meat inspection duties. The year under review has, therefore, been one of considerable difficulty.

During 1962 the carcasses and offals of 83,835 animals were inspected, representing a slight decrease on 1961, when 84,070 animals were inspected. The weight of diseased meat and offal condemned has remained practically the same at approximately 87 tons, which indicates the commendable vigilance of the depleted staff engaged on meat inspection.

The two tables on pages 56 and 57 set out in an abbreviated form particulars of the inspections carried out during 1962, and the amount of meat or offals found to be unfit for human consumption.

#### **Bruised Meat.**

The weight of meat condemned for bruising has dropped for the sixth year in succession, the weight condemned being 4,524 lbs. compared with 4,838 lbs. in 1962. This is a pleasing indication of improved handling of the live animal.



## **Tuberculosis.**

For the third year a nil return is given for tuberculosis in calves, indicating the absence of tuberculosis in the cows giving birth to the calves, and the success of the Tuberculosis Eradication Scheme.

The slaughterhouse at Walsall is one of the slaughtering centres selected by the Ministry of Agriculture, Fisheries and Food, to which imported cattle are sent for immediate slaughter. The purpose of this control is to prevent the re-introduction of tuberculosis into cattle in this country.

During the year 33 letters were sent to the Animal Health Division at Stafford concerning 35 animals of imported origin, and 5 home produced animals found to be affected with tuberculosis. These figures represent almost 55 per cent. reduction in the incidence of tuberculosis in imported cattle, and a 75 per cent. reduction in home produced cattle on the figures for last year.

## **Cysticercosis.**

There was a welcome drop in the incidence of the tapeworm cyst—*Cysticercus bovis*—in animals examined. The percentage of animals found to be affected fell from 1.31 per cent. for 1961 to 0.94 per cent. for the current year. This nevertheless represents a considerable number and in 81 cases it was necessary to condemn affected offal, whilst in one case the whole carcase and organs was condemned. All other cases were treated by prolonged refrigeration.

## **Casualty and Emergency Slaughtered Animals.**

There has been a substantial increase in the number of animals received under this heading from 856 in 1961 to 1,462 for the current year. Practically the whole of the increase is accounted for by the large number of "swine fever contact" pigs received during the year.

This increase represents a great deal of work for the meat inspectors since it is the casualty and emergency slaughtered animals which require most care in examination and judgment.

### **(c) Diseases of Animals Act Administration**

The purpose of the Diseases of Animals Act is to control outbreaks of contagious disease such as foot and mouth disease and swine fever amongst animals. One of the functions of the local authority inspectors is to serve "Form A" on any premises where disease is suspected, prohibiting movement of animals out of the premises until further investigations are carried out by the Veterinary Officers of the Ministry of Agriculture, Fisheries and Food.

On two occasions the abattoir became on "infected place" as a result of post-mortem examination revealing suspected swine fever infected pigs. The infection in the first case was brought in from a farm at Crewe and in the second case from a farm at Rushock in Worcester.



Form "A" was served on the premises on each occasion. The premises were cleansed and disinfected, the infected carcasses, viscera and slaughterhouse waste being incinerated at the Wolverhampton Road incinerator.

Walsall became affected by an "Infected Area Restriction Order" under the Swine Fever Order, 1938 on 8th December, 1962 and remained a designated area until the end of the year. Altogether 8 licences were issued for the movement of 35 pigs within the Borough of Walsall, and 183 licences were received permitting the movement of 1,364 animals into the Borough direct to the slaughterhouse.

#### **(d) Unwholesome Food Condemned**

During the year approximately  $6\frac{1}{4}$  tons of tinned and other foodstuffs were surrendered as being unfit for human consumption, which, with the 87 tons of diseased or unsound meat surrendered at the slaughterhouse, makes a total of just over 93 tons.

#### **(e) Foods of unsatisfactory quality**

49 articles of food were brought into the department by members of the public, complaining about the condition of the food. These complaints may be classified as follows:—

Foreign bodies in bottles	...	...	4
Foreign bodies in foodstuffs	...	...	19
Unsound food	...	...	26

In six cases the complaints were unfounded and no further action taken. In one case the complaint was passed on to an adjoining authority in whose district the article of food had been purchased.

All cases were carefully investigated. Shops and other food premises were visited; people were interviewed; and all practicable steps were taken to find the cause of the complaint, with the purpose of preventing further occurrences of a similar nature. In two cases prosecutions were instituted, the firms in question pleading "guilty" in both cases.

As in previous years, the department was hampered by the unwillingness of complainants to become involved in court proceedings, although the circumstances of the case might fully justify this course of action. In many cases the complainant is primarily concerned with obtaining a replacement of the unsatisfactory purchase—with an appropriate word of warning administered by the department to the vendor. On the other hand, the department is primarily concerned with finding out the cause of the complaint; how it can be prevented in the future; and whether the circumstances warrant prosecution because of negligence or indifference. Only in exceptional circumstances does the department request the replacement of the unsatisfactory food on behalf of the complainant. It will be seen that the primary considerations of the complainant and the department cannot always be reconciled.

TABLE 1

Animals inspected and found diseased:—

	Cattle exclud- ing cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed ... ..	8,092	601	4,490	44,645	26,007	—
Number inspected ... ..	8,092	601	4,490	44,645	26,007	—
ALL DISEASES EXCEPT TUBERCULOSIS AND CYSTICERCI:						
Whole carcasses condemned	7	8	7	52	139	—
Carcasses of which some part or organ was condemned ...	4,190	421	30	7,133	9,873	—
Percentage of the number inspected affected with disease other than tuber- culosis and cysticerci ...	51.86%	71.36%	.82%	16.09%	38.88%	—
TUBERCULOSIS:						
Whole carcasses condemned	1	—	—	—	—	—
Carcasses of which some part or organ was condemned ...	39	—	—	—	297	—
Percentage of the number inspected affected with tuberculosis ... ..	.49%	—	—	—	1.14%	—
CYSTICERCOSIS:						
Carcasses of which some part or organ was condemned ...	79	2	—	16	—	—
Carcasses submitted to treat- ment by refrigeration ...	79	2	—	—	—	—
Generalised and totally condemned ... ..	1	—	—	—	—	—
Total number of carcasses examined ... ..						
					83,835	

**TABLE 2**

Quantities of diseased meat and offals:—

All diseases except tuberculosis:—

	T.	C.	Q.	lbs.
Carcase meat ... ..	23	13	3	17
Offals ... ..	59	17	3	26

Tuberculosis only:—

Carcase meat ... ..	—	9	0	22
Offals ... ..	2	14	1	16
	86	15	1	25

### (f) Milk

#### Sampling.

74 samples of milk were bought during the year and submitted to the Public Analyst for determination of the chemical quality of the milk as a precaution against adulteration. The Analyst reported that all the samples except one reached a satisfactory standard. The unsatisfactory sample was T.T. Channel Islands milk which had an analysis of 9.17 per cent. solids not fat and 3.85 per cent. fat, a fat deficiency of 3.75 per cent. Further samples were satisfactory. The average composition is set out below, with the presumptive standard for comparison.

#### *Presumptive standard*

*for genuine milk* ... 8.5% ... 3% (Ordinary milk)  
4% (Channel Island milk)

Average of samples of  
milk, not Channel  
Island milk ... 8.75% ... 3.61%

Average of samples of  
Channel Islands milk 9.06% ... 4.49%

For examination to check compliance with prescribed tests for cleanliness and keeping quality and for biological examination of farm milk to find whether the organisms of tuberculosis or brucellosis were present, 476 samples were taken to the Public Health Laboratory, Stafford. Particulars and results of samples are set out in Table on page .

Only 4 samples failed to satisfy the test for keeping quality out of 359 samples submitted to this test. Whether it was due to the raising of the Atmospheric Temperature maximum from 65°F. to 70°F. or whether it was due to the lack of "Summer Weather", in no case was the temperature of the laboratory too high to permit the carrying out of the Methylene Blue test on samples submitted.



The Phosphatase Test, for determining the efficient pasteurisation of milk, was satisfied by all 317 samples of milk submitted.

The Turbidity Test, to determine whether or not the milk had been sufficiently heat treated, was satisfied by all the 80 samples of sterilised milk examined.

The success of the Tuberculosis Eradication Scheme was again shown in the result that all of the 37 samples of Tuberculin Tested milk taken at farms for biological examination were free from Tubercle bacilli. Unfortunately, however, the same could not be said regarding *Brucella abortus* which was reported to be present in 2 of the 37 samples. Although the milk from these farms was subjected to heat treatment before sale to the public, it was still possible for the disease to cause considerable loss to farmers, and also to expose any person drinking this milk in its raw state to the danger of contracting undulant fever.

During the year a farm which was rebuilt during 1961 had its cowsheds and dairy completed and milk production has recommenced.

With the steadily improving standards of milk production, the number of samples taken has again been reduced. It is hoped to reduce still further the number of routine samples taken each year, as far as this is possible with the safety to the public.

## Dairies.

There was only one sample of milk processed at a local dairy which gave an unsatisfactory result. This was at a dairy in which a new high-temperature short-time Pasteurisation Plant had been installed, and occurred shortly after the dairy had taken over control of the plant. A slight misunderstanding of the in-plant cleaning and sterilisation method used left a "pocket" in the plant not properly sterilised and a methylene blue test failure resulted. The cause was quickly discovered by the laboratory staff of the dairy and no further failures were reported.

Despite all the endeavours of the dairy management, the occasional dirty bottle or bottle containing minute fragments of glass escapes the bottle inspection system.

The efficiency of the bottle washing machines was checked by the bacteriological examination of 26 batches of 6 bottles, each taken from the conveyor belt from washer to filler during the normal run of the plant. Only one batch of 6 bottles gave an unsatisfactory result (mean bottle count of more than 2,000) which was corrected by descaling of the washing machine. Two batches of 6 gave a mean bottle count between 600 and 2,000 which was fairly satisfactory, while the remaining 23 batches of 6 gave a mean bottle count below 600. In many cases the mean bottle count was below 100.

TABLE 3

THE MILK (SPECIAL DESIGNATIONS) REGULATIONS, 1960  
BACTERIOLOGICAL EXAMINATION OF MILK, RESULTS FOR 1962

MILK DESIGNATION	SUMMARY OF RESULTS				PRESCRIBED TESTS				BIOLOGICAL TESTS			
					Methylene blue		Phosphatase		Turbidity		Tubercle bacilli	
	Satis- factory	Unsatis- factory	Void *	Total	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	Abs- ent	Pre- sent
T.T. Channel Islands (farm bottled)	16	2	—	18	16	2	—	—	—	—	—	—
T.T. (farm bottled)	23	1	—	24	23	1	—	—	—	—	—	—
T.T. Channel Islands (Pasteurised)	53	1	—	54	53	1	54	—	—	—	—	—
T.T. (Pasteurised)	80	—	—	80	80	—	80	—	—	—	—	—
Pasteurised (Channel Islands)	16	—	—	16	16	—	16	—	—	—	—	—
Pasteurised ..	80	—	—	80	80	—	80	—	—	—	—	—
Pasteurised (Schools Milk)	87	—	—	87	87	—	87	—	—	—	—	—
Sterilised ..	80	—	—	80	—	—	—	—	80	—	—	—
T.T. (Bulk)	35	2	—	37	—	—	—	—	—	—	35	2
TOTALS ..	470	6	—	476	355	4	317	—	80	—	37	2

\* Methylene Blue Test not applied by reason of atmospheric Shade temperature during period of storage exceeding 70°F.

TABLE 4

## ICE CREAM HEAT TREATMENT REGULATIONS, 1959

## Result of Methylene Blue Reduction Test, 1962

Classification	No. of samples	Percentage of total samples	Number in each Grade				Percentage in each Grade			
			Grade 1	Grade 2	Grade 3	Grade 4	Grade 1	Grade 2	Grade 3	Grade 4
All Samples (Totals)	61	100%	54	2	—	5	88.52%	3.28%	—	8.20%
Local Manufacture	18	29.51%	12	1	—	5	66.67%	5.55%	—	27.78%
Other Manufacture	43	70.49%	42	1	—	—	97.67%	2.33%	—	—

Year	No. of Samples	Grades 1 & 2 %	Grades 3 & 4 %
1958	82	81.71	18.29
1959	106	86.80	13.20
1960	106	87.74	12.26
1961	120	84.17	15.83
1962	61	91.80	8.20



**(g) Ice Cream****Ice Cream (Heat Treatment) Regulations, 1959.**

Table on page shows the results of the Methylene Blue Tests on 61 samples of ice cream taken to the Public Health Laboratory, Stafford, for examination. Five samples fell into Grade 4. This was found to be chiefly due to faulty cooling, but also, to a lesser degree, to imperfect sterilisation of some small detail of the plant. Advice was given to the manufacturers and the trouble was rectified.

**The Food Standards (Ice Cream) Regulations, 1959.**

Eighteen samples of ice cream were submitted to the Public Analyst who reported that they satisfied the standards laid down. The high chemical standard of the ice cream has been maintained as can be seen from the following average results when compared with minimum standards.

		Milk Solids other than Fat		Non Milk Fat		Milk Fat only
<i>Standard</i>	...	7½%	...	5%	...	5%
Dairy Ice Cream	...	10.80%	...	—	...	10.82%
Other Ice Cream	...	11.16%	...	10.41%	...	—

**(h) Sampling—Food and Drugs Act, 1955**

Two hundred samples were purchased from Walsall food traders and taken to the Public Analyst for examination and analysis. Two of these samples were declared unsatisfactory, equal to 1 per cent. of the total examined.

The following is a summary of the unsatisfactory samples:—

Sample Serial No.	Description	Nature of Contravention	Action taken
104	T.T. Channel Islands Milk (Pasteurised)	Fat deficiency of 3.75%	This was an inform- al sample. Formal samples and further samples were satis- factory. A letter was sent to the dairy firm.
132	Glycerine of Borax (Purchased by member of the public)	Eucalyptus oil B.P. labelled as Glycerine of Borax	Manufacturer prose- cuted. Fined £25 and costs.

## Detailed List of Samples.

(Except where otherwise stated one sample was taken of each commodity).

Batter Mix; Broken Rock; Butter Sugar Confectionery 10; Celery salt; Christmas Pudding 4; Cider Vinegar; Cinnamon; Coffee and Chicory Essence 2; Cooking Oil 3; Corn Oil; Currants; Curry Powder; Dairy Cream (tinned) 2; Double Cream (prepacked) 3; Eucalyptus Oil B.P. (labelled Glycerine of Borax); Garlic Salt; Glace Cherries 9; Golden Crumbs; Gravy Mix; Ground Almonds 6; Honey 5; Horseradish Relish; Ice Cream 18; Instant Coffee 10; Instant Coffee and Chicory; Malt Vinegar 3; Marzipan 3; Milk 74; Mincemeat; Mixed Peel 8; Mixed Pickles 2; Mixed Spice 2; Pepper 2; Pickled Beetroot; Pickled Onions 3; Pickled Red Cabbage; Raisins; Self Raising Flour 10; Short Pastry Mix; Sultanas; Worcestershire Sauce.

During the year new Regulations have been introduced which make several important changes to the law relating to the addition of preservatives, emulsifiers and stabilisers to food.

### (i) Food Hygiene

At the beginning of the year a start was made on a programme of comprehensive visiting of some 1,400 food premises in the town. For a short time the work proceeded steadily with visits concentrated on those premises where food is prepared and handled, rather than on shops where food is handled mainly in a pre-packed form. Many works of improvement were required by notice or by letter. Unfortunately, because of the staff shortages referred to elsewhere in the report, this work came practically to a halt, and it has not since been possible to resume the inspections, with the exception of visits made in connection with other duties.

The inspection of butchers' shops and meat preparation premises is carried out by the meat inspectors, and during the year 138 visits were made to these premises.

## PART 5—WATER AND SEWERAGE

### (a) Water

The South Staffordshire Waterworks Company supply the County Borough of Walsall and the following information has been supplied by the Engineer-in-Chief of the Company:—

“The water supply to the County Borough of Walsall has been satisfactory in quantity and quality.

“The supply to the County Borough of Walsall is derived from Pumping Stations outside the boundaries. The Pumping Stations are examined regularly and, where treatment is installed, bacteriological examinations of the raw water are also carried out.

“During 1962, routine samples were examined within the County Borough from the Walsall Reservoirs, Daisy Bank Crescent, Walsall, the Company's Depot in Bridgeman Street and from Pinfold at Bloxwich. 28 out of 33 samples from the Company's Depot in Bridgeman Street were free from coliform bacteria as were 26 samples from Walsall Reservoirs, 13 samples from Daisy Bank and 14 samples from the Pinfold at Bloxwich.

“The average chemical results for 1962 of the tap samples from Daisy Bank Crescent and Walsall Depot were: —

				Daisy Bank Crescent		Walsall Depot	
				Walsall	Hednesford	Lichfield	
pH	...	...	...	7.1	...	7.3	7.4
Alkalinity (CaCO <sub>3</sub> )	...	...	...	100	p.p.m.	110	124
Chlorides (Cl)	...	...	...	24.0	„	35.9	52.7
Ammoniacal Nitrogen (N)	...	...	...	.013	„	.005	Trace
Albuminoid Nitrogen	...	...	...	.070	„	.054	.039
Oxidised Nitrogen (N)	...	...	...	4.8	„	2.8	3.1
Oxygen Absorbed (3 hr at 27°C)	...	...	...	.76	„	.60	.51
Temporary Hardness	...	...	...	95	„	104	118
Permanent Hardness	...	...	...	123	„	91	76
Total Hardness	...	...	...	218	„	195	194
Iron (Fe)	...	...	...	.04	„	.03	.10
Manganese (Mn)	...	...	...	Trace	„	Nil	Trace
Lead (Pb)	...	...	...	Nil	„	Nil	.06
Free Cl	...	...	...	Trace	„	Nil	Trace

“The waters are not liable to plumbo-solvency, all the samples being free from any appreciable quantity of lead.

“In cases of possible contamination such as burst or damaged mains, emptying reservoirs etc., emergency chlorination is performed. Special apparatus and staff are available for this work. New mains etc., are not brought into use until the water has been examined and proved satisfactory.

“The number of houses with a piped water supply in the County Borough of Walsall at 31st December, 1962 was 37,839.

“The number of houses supplied from outside taps was 204. These houses are included in the total of 37,839.



“My Company have no accurate population figures for the County Borough of Walsall but calculations are based on a total of 3.43 persons per house.”

In addition to the samples of water taken by officers of the South Staffordshire Waterworks Company, samples are also taken by the public health inspectors of the department. Particulars of these samples are set out in the following table.

Source of Sample	Chemical Analysis	Bacteriological Examination— Classification by Coliform Count				Totals
		Excel- lent	Satis- factory	Susp- icious	Unsatis- factory	
Boreholes ...	—	34	2	—	1	37
Spring water ...	—	—	—	—	4	4
S.S.W.W. Co.	6*	8	—	—	—	14
Totals ...	6*	42	2	—	5	55

\* Satisfactory

The four unsatisfactory samples of spring water were taken from a spring used as a source of water by a family living in a caravan, and they illustrate one of the hazards of caravan life. The department is trying to persuade this family to move to a better site. The unsatisfactory sample from a borehole was followed by a series of perfectly satisfactory samples, and no adequate explanation of the unsatisfactory sample can be given. Chlorination of the borehole water before use removes any danger.

### (b) Sewerage

M. E. Habershon, Esq., O.B.E., M.Eng., Borough Engineer and Surveyor, has supplied the following information in a letter dated the 23rd March, 1963:—

“In considering the arrangements for sewerage and sewage disposal in Walsall, it is convenient to consider the borough in two parts. The northern part of Walsall is served by the Goscote Joint Sewage Works, whilst the central and southern parts of the borough are served by the Brockhurst Sewage Works.

“From observations during 1962 in the northern part of Walsall, it is evident that although the sewerage of this area is at present satisfactory, certain sewers are operating at or near maximum capacity. The Corporation’s Lower Farm Housing Estate is now nearing completion and several other smaller sites in this part of the Borough have also been developed for housing, and although wherever possible a separate system of drainage is adopted, with storm water being taken to nearby streamcourses, the foul sewage flow to Goscote has steadily increased over the last few years. The Goscote Joint Sewage Works, together with its recently completed extensions, is now treating a flow of about 2.0 million gallons per day dry weather flow, with plant having a design capacity of 1.8 m.g.d. (d.w.f.). A scheme for a further extension at Goscote is therefore being prepared, with a view to increasing the capacity to 2.8 m.g.d. (d.w.f.) and this scheme will be submitted to the Goscote Joint Sewage Committee very shortly.

“The Brockhurst Sewage Works, which serves the central and southern districts of Walsall, is seriously overloaded, treating a dry weather flow of 6.15 million gallons per day on a works with a design capacity of 4 m.g.d. dry weather flow. A scheme for extensions to increase the capacity to 8 m.g.p.d. dry weather flow has now been designed and at its meeting on March 18th, the Council approved the proposed extensions at an estimated cost of £470,000. Negotiations with the Ministry of Health and Ministry of Housing and Local Government will now proceed.

“The above extensions will enable the Brockhurst Sewage Works to deal with the present and anticipated flow for several years to come.

“Several sewers in the central area of Walsall, which is, of course, the older part of the Borough, are known to be overloaded, and often in poor structural condition. As redevelopment occurs, where detailed investigation shows the necessity, the old sewers are being abandoned and new sewers constructed. This type of work is now in hand in Digbeth, where a new foul sewer is being laid along Digbeth and High Street.

“Loan sanction has also been obtained for the reconstruction of the sewer in Willenhall Lane, which will be carried out this year.

“The increasing consumption of water per head of population, which inevitably accompanies a rising standard of living, together with tremendous increases in trade effluent flow from industry, will place a correspondingly higher load on sewerage systems and sewage works. Projects are already in hand for dealing with these increased flows at the two sewerage works in Walsall, and there is no doubt that a programme of sewerage works will be carried out in Walsall during the next few years, replacing old sewers and constructing new sewers on new lines to serve both residential and industrial redevelopment.”



## **PART 6—ATMOSPHERIC POLLUTION AND NOISE CONTROL**

### **Examination of Plans.**

The Health Department continues to place emphasis on preventive measures. In co-operation with the Public Works Department during the year 123 plans concerning industrial or commercial premises were inspected with a view to ensuring at the planning stage that the possibility of nuisance arising from smoke, dust, grit or fume emission, or from vibration or noise, was reduced to a minimum.

In 44 cases where plans were examined the question of smoke emission arose; in 6 cases there was a possible nuisance from grit emission; and the possibility of fume emission in 17 cases. In 5 of the plans inspected the probability of nuisance from noise or vibration arose. The department made recommendations with regard to chimney heights in 17 cases, and it is satisfactory to note that where any recommendation was made regarding plant installation or modification, the co-operation of the architects and industrialists concerned was readily obtained.

### **Dust and Fume Control.**

There appears to be an increasing awareness by industry of its responsibilities with regard to atmospheric pollution and a number of factories have improved their dust collecting appliances. Three more of the larger foundries in the town have equipped their cupolas with wet type grit arresters but action with regard to the others has been retarded because of discussions at national level between local authorities and the industry with a view to the implementation of uniform standards throughout the country. Towards the end of the year a circular was being prepared to send to all industrialists reminding them of the requirements of the Clean Air Act, 1956 laying down the 5th July, 1963 as the date by which all deficiencies in equipment should be made good. Each of the two large copper works in the Borough have increased the capacity of their blast furnaces but each has also increased the size and efficiency of their fume filtration plant.

Once again the department has worked in close co-operation with H.M. Inspectors under the Alkali etc. Works Act in the control of nuisance from the various registered processes in the Borough.

### **Smoke Control Areas.**

The Walsall Smoke Control Areas Nos. 1 (Lower Farm Estate) and 2 (Brookhouse Estate) have been in operation for over twelve months. Visits are made to the Areas from time to time and any outstanding problems are discussed with the occupants of the houses. So far a solution has always been found. There have been one or two cases where verbal warnings have been given concerning the emission of smoke from burning bituminous coal, but these have proved sufficient to prevent any recurrence.



The survey of the central area of the town was completed and a report will be submitted to the Health Committee early in the new year.

### **Industrial Premises.**

Fifteen notifications to install new fuel burning equipment as required by Section 3(3) of the Clean Air Act, 1956 were received by the department. In two cases only was prior approval applied for and certain modifications were required before such approval was granted.

During the year legal proceedings were taken against two firms for contraventions of Section 1(1) of the Clean Air Act, 1956 and the Dark Smoke (Permitted Period) Regulations 1958. Both firms pleaded guilty and in one case a fine of £30 plus £6 6s. 0d. costs was imposed and in the other the firm was fined £3.

A further contravention has been reported to the Committee and legal proceedings were authorised but had not taken place before the end of the year.

### **Measurement of Air Pollution.**

As mentioned in last year's report, the department dispensed with the use of deposit gauges and lead peroxide candles as the means of measuring atmospheric pollution. Their place has been taken by the installation of five volumetric apparatus which give a more accurate picture, and also give a daily record.

The five instruments are sited as follows:—

- No. 1 Town Centre—  
Council House, Walsall.
- No. 2 Industrial—  
G.P.O. Stores, Pleck Road, Walsall.
- No. 3 High Density Residential—  
Palfrey School, Milton Street.
- No. 4 Low Density Residential—  
Beechdale Clinic, Beechdale Estate.
- No. 5 Smoke Control Area—  
Orchard Road, Brookhouse Estate.

It was not possible to install the apparatus in the Smoke Control Area until October but the remainder have been in operation the whole year. The results are set out in tabular form on pages 75 and 76, but a summary of the results is set out below for ease of reference.

## Smoke

Averages—Microgrammes per cubic metre.

			Whole year	Winter (Jan.-Mar. & Oct.-Dec.)	Summer (Apr.-Sep.)
No.	Site				
3	Palfrey	...	219	332	106
1	Town Centre		196	286	90
2	Pleck	...	176	267	87
4	Beechdale	...	151	231	72
5	Brookhouse	...	—	155 (Oct.-Dec.)	—

These figures follow the pattern of the three months October—December, 1961, again showing the greatest pollution is in the high density residential area. It is also of significance that the average pollution for the six summer months is approximately only one third that of the six winter months, showing the part played by the domestic fire in increasing winter pollution.

The yearly averages for the Town Centre and Beechdale show an increase over those for 1961. This is undoubtedly due to the unusually cold and wet summer and the extremely severe winter, resulting in a much larger quantity of fuel being used.

## Sulphur Dioxide

Averages—Microgrammes per cubic metre.

		Whole year	Winter (Jan.-Mar. & Oct.-Dec.)	Summer (Apr.-Sep.)
No.	Site			
1	Town Centre	264	364	165
3	Palfrey ...	223	302	145
2	Pleck ...	192	263	122
4	Beechdale ...	169	237	102
5	Brookhouse ...	—	171	—

It can be seen that the amount of pollution by sulphur dioxide present in the atmosphere bears a strong relationship to the amount of smoke pollution also present. It is suggested that the higher ratio of sulphur dioxide to smoke in the town centre is because of the large amount of heavy fuel oil burned in the numerous central heating and other boiler installations in the vicinity.

The amount of sulphur dioxide pollution for the six summer months is approximately half that recorded during the six winter months.

## **Noise Control.**

During the year a number of complaints was received of excessive noise. Several visits were made to premises and with the co-operation of the various managements the noise was minimised to within bearable limits. In one case this involved resiting a large press and the provision of sound and vibration absorbing pads. The noise meter purchased by the Department has proved extremely useful, and has been borrowed by adjoining authorities.

The problems of noise and vibration are highly technical and it is often extremely difficult to find adequate and practicable measures to control them. The simple answer to all noise and vibration complaints does not exist.

Thanks are expressed to Mr. B. R. Edmondson, A.R.I.C., M.Inst. S.P., and his staff for carrying out chemical analysis in connection with atmospheric pollution and to Mr. J. C. W. Day, B.Sc., F.R.Met. Soc. for supplying meteorological information.

## **PART 7—DISINFESTATION AND DISINFECTION**

The work of the disinfestation and disinfection is carried out for the whole of the Borough from the Disinfestation Depot at Bloxwich.

The supervision of the depot is generally under a Senior District Public Health Inspector. The disinfestation staff consists of a Foreman, Assistant Foreman and four disinfestation assistants. Four of the staff are trained in the use of hydrogen cyanide and all are trained in the use of modern rodenticides and insecticides.

The inspection of the houses of prospective Council tenants was carried out by the Disinfestation Foreman, particular attention being paid to the detection of woodworm infestations in furniture. Over 1,300 inspections were made during the year.

The practice of the fumigation of furniture from condemned property with hydrogen cyanide is continued and similar fumigation is carried out of the furniture of prospective Council house tenants when the circumstances warrant this action. 236 removals were carried out during the year, of which 184 were the subject of hydrogen cyanide fumigation.

330 premises were treated for insect pests, 231 of these premises being Council houses. The clothing of 33 vagrants was disinfested.

## **Treatment of Clothes and Bedding.**

For many years it has been the practice to treat bedding in the steam disinfector, when it has been suspected that the bedding might have become infested with vermin. It is not possible to subject bedding to fumigation with hydrogen cyanide, because of the risks involved of this dangerous fumigant being retained in the bedding in lethal amounts.



With the increasing number of spring interior mattresses, divans, and mattresses with plastic finishes, received for disinfestation, which cannot be subjected to steam disinfestation, it has been necessary to seek an alternative method of fumigating bedding. Experiments were carried out in conjunction with the Pest Control Division of the Ministry of Agriculture, Fisheries and Food. The fumigant used was a mixture of carbon tetrachloride and ethylene dichloride, but up to the end of the year the results had proved disappointing. Further experiments were planned for the coming year with the possible use of methyl bromide.

During the course of the year the steam disinfector, which was originally installed in 1939, was given a complete overhaul. Although frequently used for disinfestation purposes, the steam disinfector was used only sixteen times during the year to disinfect bedding which had been in contact with infectious disease.

### **Rodent Control.**

It has been possible to carry out two sewer treatments during the course of the year, using sodium fluoracetamide, which has proved to be a highly effective poison. There is little doubt that if regular sewer treatments could be carried out using this poison, there would be a fall in the number of rat complaints received by the department. Considerable difficulty is experienced, however, in carrying out sewer treatments in the centre of the town because of traffic conditions. Because of the difficulty and the need to give the old sewers in the centre of the town particular attention, it was necessary to arrange for these sewers to be treated on Sunday mornings.

The number of complaints of rat infestation fell from 380 in the previous year to 339 in the present year. The number of mice complaints rose from 222 to 241. About 2,400 visits were made by disinfestation assistants in connection with rodent complaints.

The income from disinfestation work was £50 and that from rodent control work was £280, giving a total of £330 compared with £344 in 1961. Most of the work is carried out free of charge.

## **PART 8—GENERAL**

### **Factories.**

There are 834 factories on the departmental register compared with 822 last year. 811 are equipped with mechanical power. Particulars of inspections are set out in Table .

### **Public and Schools Swimming Baths.**

A total of 93 samples of water were taken throughout the year from all the swimming baths in the borough, acting as a check on the efficiency of the chlorination and filtration plants. In only two

samples were the reports unsatisfactory, both samples being from the Schools Swimming Instruction Bath. This is a comparatively small and shallow bath and is at times subjected to heavier loads than the plant may be able to deal with. Follow-up samples were satisfactory after each unsatisfactory result.

The results are set out below.

Source of Sample	Bacteriological Examination— Classification of Coliform Count				Total
	Excel- lent	Satis- factory	Suspi- cious	Unsatis- factory	
Indoor Swimming Baths	61	—	—	—	61
Open Air Swimming Pool	4	1	—	—	5
Schools Swimming Baths	23	2	—	2	27
	88	3	—	2	93

No water samples were taken this year from the paddling pools at the Children's Lido, but the water was frequently tested for satisfactory chlorination.

### **Fertilisers and Feeding Stuffs.**

Seven samples of fertilisers were bought informally and examined by the Agricultural Analyst; 5 samples were satisfactory and 2 samples were reported as being unsatisfactory. In neither case was it possible to take a sample in the prescribed manner, owing to the stocks of fertilisers being sold out. One sample had an incorrect form of statutory statement and the other was outside the limits of variation. The latter was due to the wrong label being stuck on the bottle.

### **Rag Flock and Other Filling Materials.**

Six samples were taken under this Act, all of which were satisfactory.

### **Supply of Dustbins.**

During the year 286 new bins or replacement bins were supplied under the Council's hire scheme. 21 owners of property decided to provide their own bins, and many others obtained bins independently of action by the Council. The number of persons taking part in the scheme continues to increase and about 2,250 persons now hire bins from the Council.

## Pet Animals Act, 1957.

Nine applications were received for a licence to operate a business for selling pets, and all the applications were approved.

## Hairdressers and Barbers.

The number of registered premises is now 132. Inspection of these premises is carried out under the provisions of the Walsall Corporation Act, 1954 and local byelaws.

## PART 9—LEGAL PROCEEDINGS

Legal proceedings were taken on six occasions, as shown in the following table.

Date of proceedings	Act under which proceedings taken	Nature of contravention	Result of Action
9.3.62	Public Health Act, 1936. Section 94.	Non-compliance of notice served under Section 93 of the Public Health Act, 1936.	Order for work to be carried out and abate the nuisance in 28 days. 8/6d. Court fee.
8.6.62	Dark Smoke (Permitted Periods) Regulations 1958.	Unlawfully did permit dark smoke to be emitted. (Two summonses).	£15 for each of the two summonses. £6 6s. 0d. advocates fee.
17.8.62	Food & Drugs Act, 1955 (Section 2).	Sale of toffee containing tobacco.	Fined £5 5s. 0d. Costs £1 18s. 6d. Advocates fee £5 5s. 0d.
21.11.62	Food & Drugs Act, 1955 (Section 2).	Sale of drug not of the nature demanded.	Fined £25 0s. 0d. Advocates fee £5 5s. 0d. Special costs £3 5s. 0d.
30.11.62	Food Hygiene (General) Regulations 1960. (Regs. 5 and 29 (i) (b).	Exposed food to the risk of contamination.	Fined £5 0s. 0d.
		Vehicle for transporting meat not fitted correctly.	Fined £15 0s. 0d. Advocates fee £6 6s. 0d.
28.11.62	Clean Air Act, 1956 Section 16(2).	Smoke nuisance from burning rubber tyres.	Order to abate nuisance. Advocates fee £5 5s. 0d. Court costs 3/6d.



TABLE 9

# FACTORIES ACTS, 1937 TO 1959

Prescribed particulars on the administration of the Factories Act, 1937.

1.—**INSPECTIONS** for purposes of provisions as to health (including inspections made by Public Health Inspectors)

Premises (1)	Number on Register (2)	Number of			
		Inspections (3)	Written notices (4)	Occupiers prosecuted (5)	
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	23	16	—	—	
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	811	94	11	—	
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworker's premises) ... ..	6	—	—	—	
	840	110	11	—	

TABLE 10

## 2.—CASES IN WHICH DEFECTS WERE FOUND

Particulars (1)	Found (2)	Remedied (3)	Referred		Number of cases in which prosecutions were instituted (6)
			To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)	1	1	—	1	—
(a) insufficient	10	10	—	7	—
(b) Unsuitable or defective	—	—	—	—	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—	—
TOTAL	11	11	—	8	—

## OUTWORKERS

No notifications of the employment of outworkers were received during the year.

TABLE 11

## VOLUMETRIC METHOD—SMOKE

MONTHLY AVERAGES FOR 1961—1962.

Concentrations Expressed as Microgrammes per Cubic Metre.

## SITES:

1.	Town Centre ... ..	Walsall
2.	Industrial ... ..	Pleck
3.	High Density Housing	Palfrey
4.	Modern Open Planning	Beechdale
5.	Smoke Control Area ...	Brookhouse

Month	1	2	3	4	5
January ...	257	268	310	218	—
February ...	176	186	259	155	—
March ...	294	275	336	254	—
April ...	121	134	155	117	—
May ...	108	110	140	88	—
June ...	71	54	66	46	—
July ...	67	65	68	51	—
August ...	65	53	70	40	—
September ...	107	103	138	88	—
October ...	240	207	274	178	99
November ...	342	300	373	258	159
December ...	409	363	438	325	206

## Averages for Year:—

1962 ...	196	176	219	151	—
1961 ...	149	—	—	129	—
1960 ...	150	—	—	130	—
1959 ...	150	—	—	110	—
1958 ...	160	—	—	—	—

Average for Winter Months 1962 (Jan. to Mar. and Oct. to Dec.)

286	267	332	231	155
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Average for Summer Months 1962 (April to September).

90	87	106	72	—
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TABLE 12

## VOLUMETRIC METHOD—SULPHUR DIOXIDE

MONTHLY AVERAGES FOR 1961—1962.

Concentrations Expressed as Microgrammes per Cubic Metre.

## SITES:

1.	Town Centre ... ..	Walsall
2.	Industrial ... ..	Pleck
3.	High Density Housing	Palfrey
4.	Modern Open Planning	Beechdale
5.	Smoke Control Area ...	Brookhouse

Month	1	2	3	4	5
January ...	356	258	295	206	—
February ...	291	136	185	131	—
March ...	341	252	290	243	—
April ...	215	155	187	131	—
May ...	202	146	179	117	—
June ...	142	95	118	86	—
July ...	147	103	122	91	—
August ...	112	90	107	66	—
September ...	173	140	159	119	—
October ...	288	206	203	174	93
November ...	415	313	366	273	174
December ...	490	412	470	393	245

## Averages for Year: —

1962 ...	264	192	223	169	—
1961 ...	239	—	—	128	—
1960 ...	219	—	—	132	—
1959 ...	180	—	—	84	—
1958 ...	160	—	—	—	—

Average for Winter Months 1962 (Jan. to Mar. and Oct. to Dec.)

364	263	302	237	171
-----	-----	-----	-----	-----

Average for Summer Months 1962 (April to September).

165	122	145	102	—
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# **REPORT**

## **OF THE**

### **PRINCIPAL SCHOOL MEDICAL OFFICER**

**For the Year ended 31st December, 1962**

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MR. CHAIRMAN, LADIES AND GENTLEMEN,

It is with pleasure that I present my report on the School Health Service for the year 1962. The medical staff is unchanged since my last report. In the School Dental Service, Mrs. I. M. Millar was appointed to the post of Principal School Dental Officer following the resignation of Mr. R. E. Morgan. Members will recall that Mrs. Millar was a member of the Service prior to her new appointment and I am sure she has the good wishes of us all in her added responsibilities.

It gives me cause for satisfaction that national government approval has been given to Fluoridation of Domestic Water Supplies and that this local authority has accepted the measure for Walsall's water. It will be remembered that I described in this report last year the major benefits to be derived from fluoridation.

Recently in the medical press the question of parental rights in the periodic medical examination of children at school has come up for discussion. A doctor protested in a letter to the British Medical Journal that he had been required to submit his 6 year old daughter for such an examination, and that he had been informed that there was no opportunity for him to object, though he did not wish the examination to be carried out. A county medical officer of health replied in the same journal to the points raised. However, one is disturbed that if a doctor can be so misinformed what must be the confusion in the minds of non-medical parents regarding their legal position in this matter.

Section 48 paragraph 2 of the Education Act 1944 states that "For the purpose of securing the proper medical inspection of the pupils in attendance at any school, college, or other educational

establishment, any Officer of the Local Education Authority, authorized in that behalf by the Authority, may require the parent of any pupil in attendance at any such school to submit the pupil for medical inspection, in accordance with arrangements made by the Authority . . . and any person who fails without reasonable excuse to comply with any such requirements, shall be liable on summary conviction to a fine not exceeding five pounds."

Of course, 'reasonable excuse' is the important recognition made of parental rights, and one could not imagine a harsh interpretation being imposed in any individual case. Nevertheless, this part of the Act is designed to protect a child who is neglected and/or in poor health, where the parents have not arranged for medical or other aid and where consent for school medical examination is refused.

Vaccination against tuberculosis continues to be a feature of our prophylactic measures. It will be recalled that in my last report I was able to record a very satisfactory conversion rate among teenage school children who received B.C.G. vaccination. For the year under review the conversion rate is 95.9%, exactly 1% down on last year's rate, but still a most satisfactory figure.

Few of us realise how dramatic has been the reduction in the death rate from tuberculosis which has occurred within the lifetime of most of us. In 1930, 14,010 persons between 15 and 29 years of age died from tuberculosis. In 1960, only 75 persons in the same age group died from the disease. Although the decline in the death rate in the over-60's has been much less marked, and there are several reasons for this phenomenon, the trend is the same. While B.C.G. vaccination occupies an important place in the saving of life and avoidance of incapacity from tuberculosis, other factors have played a vital part—general public health measures, mass miniature radiography and drug treatment of the disease being the remaining members of the quartet.

It was not until 1943 that an effective drug for the killing of the tubercle bacillus became available. This was streptomycin. Since then other drugs have been discovered, notably P.A.S. and I.N.A.H. These three drugs have been used to their maximum advantage when combined in pairs. In this way, intensity and duration of effect are enhanced. With modern therapy, the respiratory secretions of cases of pulmonary tuberculosis become sterile in a comparatively short time, the outstanding community benefit of this being that children and young adults have much less chance of being infected with virulent bacilli. Strange as it may seem, this state of affairs creates, if anything, an increased need for B.C.G. vaccination of the young teenager, as encountering a small dose of tubercle bacilli, derived from an ambulant infective person, in the course of normal life was the means whereby the individual acquired immunity in former days.



Mass Miniature Radiography is a technique by which X-ray examination of the chest cavity can be carried out quickly and economically both in personnel and financial resources. Thus it is possible to survey large groups of the population and to detect tuberculosis and other chest diseases at an early stage, often before the individual has any symptoms of illness. M.M.R. is a measure deserving the best of public support.

Reference was made in last year's report to the introduction of screening the school leaver, by means of urine testing, for diabetes and Bright's Disease or nephritis. The first full application of the scheme has been carried out and a sufficient number of children requiring further investigation has been detected to justify a permanent place for the technique in the School Health Service. I do appreciate that it makes another call on the goodwill of head teachers and their staffs, but knowing their concern for the entire well-being of their pupils, I have no doubt that I can continue to rely on their co-operation.

There are few major local authorities where the Principal School Medical Officer is not the same man as the Medical Officer of Health and this is a logical and sensible state of affairs, for the school is but another field of activity of the family and it is families in the mass, constituting the community, which are the responsibility of the M.O.H. in his capacity of community physician. Thus the School Health Service can be seen as an integral part of the Public Health Service, and I prefer the description "Public Health" to the popular and much used alternative "Social Medicine". Social Medicine is a part of Public Health and the part cannot be greater than the whole. Indeed there are so many practitioners of social medicine who are not doctors that "medicine" does not belong in the title for the most part. Some years ago an American, Professor J. M. Mackintosh, suggested that "social medicine is the application to medical practice in the home, the factory, the clinic and the hospital of the principles of preventive medicine." If we modify this slightly by inserting "the school" after "home" we achieve a very reasonable definition and realise once more the importance of partnership between the medical officer of health and the general practitioner.

## 1—SCHOOL HEALTH WORK

**Periodic Medical Examinations**—For the third year in succession I draw attention to the general classification of a child after school medical examination. At present this is limited to describing a child as satisfactory or unsatisfactory with regard to physical and psychological condition. Thus, of the 6,425 children examined in 1962, 99.87% were classified as satisfactory. "Satisfactory" is being made to embrace all grades of health from the child who has near-perfect physique and perfect fitness to the child who is merely not unsatisfactory. This is far too wide a range to be of value either at the time of the examination or at a later date.

The following list of percentage of children in the various age groups who were accompanied by a parent at medical examination is interesting. The high incidence of parent attendance for infant school children contrasts sharply with just over a third at the leavers' examination. Yet the leavers' medical is an important one; far from the parent's presence being unnecessary, as so many 15-year-olds seem to think, a parent there amplifying the child's statements or even revealing important history which the child has suppressed can be of great help to the examining doctor. Parents should insist on their right to accompany their youngsters at whatever stage of childhood the examination takes place.

Year of Birth			Percentage	No. examined	
1958 and later	...	...	78.0%	...	382
1957	...	...	88.4%	...	1,661
1953	...	...	81.3%	...	605
1952	...	...	79.4%	...	267
1951	...	...	77.3%	...	1,163
1950	...	...	79.0%	...	563
1948	...	...	32.3%	...	1,190
1947 and earlier	...	...	34.3%	...	594

Of the 6,425 children examined, 470 were found to require treatment. This is arranged either at the school clinics or with the co-operation of the general practitioners concerned.

**School Clinics**—At 1,629 the number of individual children attending medical clinics has declined to approximately the same figure as in 1960. Four factors are involved in promoting thriving school clinics, enthusiasm on the part of the staff, referrals by school doctors carrying out periodic examinations in school, referrals by teachers, and the knowledge on the part of parents that these clinics have a specialist function and are not meant to duplicate the facilities available at the general practitioner's surgery. The clinics are there to be used, and it is regrettable that they are not being used to anything like the capacity of which they are capable.



There are five school clinics in the town, Bradford Street, Field Road, Littleton Street, Beechdale and Coalpool. Below is set out the sessional complement of the clinics.

BRADFORD STREET CLINIC, WALSALL.

Medical	...	...	...	3 sessions weekly
Dressings	...	...	...	6 sessions weekly
Ophthalmic	...	...	...	2 sessions weekly
Dental	...	...	...	5 sessions weekly

LITTLETON STREET CLINIC, WALSALL.

Dental	...	...	...	8 sessions weekly
Speech Therapy	...	...	...	3 sessions weekly

COALPOOL CLINIC, WALSALL.

Medical	...	...	...	1 session weekly
Dressings	...	...	...	2 sessions weekly

FIELD ROAD CLINIC, BLOXWICH.

Medical	...	...	...	2 sessions weekly
Dressings	...	...	...	3 sessions weekly
Dental	...	...	...	1 session weekly
Speech Therapy	...	...	...	2 sessions weekly

BEECHDALE CLINIC, WALSALL.

Medical	...	...	...	1 session weekly
Dressings	...	...	...	1½ sessions weekly
Speech Therapy	...	...	...	2 sessions weekly
Child Guidance	...	...	...	1—2 sessions weekly
Dental	...	...	...	4 sessions weekly

The school nurses, working under the school doctors, are able to deal expeditiously with many troublesome conditions in addition to the dressing of minor injuries and continuity of treatment is ensured through the close association of the work with the schools. During the year 1,654 children attended for these purposes and a total of 5,225 attendances was made. The number of attendances has increased by 219 compared with the previous year though the number of individual children attending is 45 less.

The examination in the schools of the hearing of eight-year old children by pure-tone sweep audiometry was continued during the year. Any other child where there was some doubt about the hearing could be brought forward by the teacher. All children failing the



sweep test were referred to the school doctor for further investigation at a clinic. 1,499 children were examined in the schools and 64 were referred for further testing though 13 of these could not be persuaded to attend. 13 children were found to have such a degree of deafness as to merit their being sent to an Ear, Nose and Throat surgeon for specialist opinion.

## **2—HANDICAPPED CHILDREN**

Special educational treatment is an essential part of the educational system of this country. It has a two-fold object, the fulfilment of the community's moral obligation and the response to the dictates of national economics. The first object is self-explanatory, but the second deserves some examination. Whether a child is physically handicapped, mentally subnormal or has a dual handicap, he can with appropriate handling and care be trained and educated to become an adult who will make the best possible use of his aptitudes and, in the majority of cases, be able to support himself. Society, then, benefits in two ways. The handicapped person contributes to the gross national product and makes a minimum demand on the welfare services. It is fitting that the nation should devote a larger proportion of its wealth than in former years to the provision of university and technical college places if we are to compete efficiently in the modern world, but it is equally sound economic commonsense to allocate funds for the education of the handicapped. A movement which commenced in philanthropy has developed into one in which enlightened self-interest has an important role.

During 1962 recommendations of the medical staff resulted in the arrangement of Home Teaching in one case and the cessation of Home Teaching in one case, the admission of one child to Day School for the Partially-Sighted, two to Residential and three to Day Schools for the Deaf and Partially Deaf, two to Residential Schools for the Physically Handicapped, four to Residential Schools for Delicate children and 22 to Day Special School for Physically Handicapped and Delicate Children, one to a Residential School and one to a Hostel for Maladjusted Children, 9 to Residential and 34 to Day Special School for E.S.N. children.

At the end of the year, 6 children were awaiting places in residential and 43 in day special schools for E.S.N. children, compared with a total of 60 at the end of the previous year. It is encouraging to note that, for the first time, placements have exceeded the number of new ascertainties in respect of E.S.N. children and it should be possible to offer places to all children at present on the waiting list before the end of 1963. Of the 49 children at present waiting, places have been offered in 20 cases but acceptance has been refused by the parents.

**(a) School Placement**

The following table shows the number of handicapped children who were in attendance at special schools (day and residential) in January, 1963:—

**BLIND AND PARTIALLY SIGHTED.**

	Boys	Girls	Total
Royal Institute for the Blind, Birmingham	—	2	2
Exhall Grange, Warwickshire ...	1	—	1
Royal Normal College for the Blind, Shrewsbury ... ..	1	—	1
Condover Hall, Shrewsbury ... ..	1	—	1
Priestley Smith Day School, Birmingham	2	2	4

**DEAF AND PARTIALLY DEAF.**

Mary Hare Grammar School ... ..	—	1	1
Royal School for the Deaf, Birmingham	6	1	7
The Mount Deaf School, Stoke-on-Trent	1	1	2
Rangemore Hall, Needwood ... ..	1	1	2
Longwill Day School, Birmingham ...	1	—	1
Braidwood Day School, Birmingham ...	5	—	5

**PHYSICALLY HANDICAPPED AND DELICATE.**

Penhurst, Chipping Norton ... ..	1	—	1
Baskerville, Birmingham ... ..	—	1	1
Hinwick Hall, Wellingborough ...	1	—	1
Ian Tetley, Harrogate ... ..	1	—	1
Ingfield Manor, Sussex ... ..	—	1	1
Carlson House Day School for Spastics, Birmingham ... ..	1	—	1
Kingswood, Albrighton ... ..	2	2	4
Reedwood Park Day School ... ..	28	34	62

**MALADJUSTED.**

Shotton Hall, Shrewsbury ... ..	1	—	1
Shenstone Lodge, West Bromwich ...	3	2	5
St. Hilliards, Mickleton Manor ...	1	—	1
Swalcliffe Park, Banbury ... ..	1	—	1
The Dell Hostel, Malvern Wells ...	1	—	1

**EDUCATIONALLY SUBNORMAL.**

Beacon School, Lichfield ... ..	38	—	38
St. Francis School, Monyhull ... ..	—	8	8
Corley (Town Thorns Unit) Coventry ...	—	1	1
Townhill Park, Southampton ... ..	—	4	4
Wavendon House, Nr. Bletchley ...	—	2	2
The Sheiling, Ringwood ... ..	—	1	1
The Castle Day School ... ..	80	80	160



### **(b) Speech Therapy.**

Our two Speech Therapists, Mrs. A. Cooper and Mrs. B. Cooper, have worked throughout the year on a part-time basis, their joint sessions forming the equivalent of one full-time Speech Therapist.

In January, 1962, 105 children were receiving treatment and a further 160 commenced treatment during the year, whilst 156 were discharged. 265 children received treatment during the year, making 3,026 attendances, and 109 children remained on the registers at the end of the year.

Of the children treated during 1962, 32 had a stammer, 203 had dyslalia (mispronunciation of one or more sounds), 3 had cleft palate and 27 had miscellaneous defects.

Parental co-operation was good in most cases and 370 parents attended the clinics for interview. However, it has been necessary once again to discharge quite a number of children by reason of failure to attend even though homes have been visited and every effort made to obtain parental co-operation.

The work in schools from which it was most difficult to obtain clinic attendance has continued with marked success. Group treatment can more easily be arranged in suitable cases and teachers have given enthusiastic co-operation, often supervising daily exercises for the children.

It has been felt for some time that work in schools could be extended with advantage, and at the end of the year some re-organisation took place. Mrs. B. Cooper will continue to work in clinics but Mrs. A. Cooper will work entirely in Primary Schools which are situated at some distance from the clinics. By this means it is hoped to give treatment to the largest possible number of children and to include children whose parents have not been sufficiently interested to make treatment at the clinics possible.

### **(c) Child Guidance.**

Our arrangement with West Bromwich Local Education Authority has continued and their Educational Psychologist and Psychiatric Social Worker have conducted a weekly session at the Beechdale Clinic in Walsall. Although it has not been found possible to conduct a second session during the week, due to staff shortage, additional sessions are being held on Saturday mornings.

Children requiring to see the Psychiatrist, or needing regular play therapy have continued to attend the West Bromwich Child Guidance Clinic.

47 children received treatment during the year.



### 3.—PUPILS EXAMINED

#### Heights and Weights

The following table shows the average heights and weights of all pupils medically examined during 1962.

	Number		Height, ins.		Weight, lbs.	
	Boys	Girls	Boys	Girls	Boys	Girls
New Entrants (5+)	818	843	43.8"	43.8"	44.9	43.9
Children born in 1953	306	299	51.6"	51.5"	62.7	62.9
Children born in 1952	131	136	52.2"	52.2"	65.9	64.5
Children born in 1951	600	563	55.2"	55.5"	77.3	79.1
Children born in 1950	267	296	55.9"	56.4"	79.3	79.3
Children born in 1948	597	593	62.9"	62.0"	111.4	111.7
Children born in 1947	318	276	63.7"	63.0"	113.7	115.2

The average heights and weights of school children do not show any great variation compared with the previous year, with the exception of children born in 1947. In this age group the weight of boys has decreased by 4.2 lbs. and the weight of girls has increased by 3.5 lbs.

### 4.—THE WORK OF THE SCHOOL NURSES

There has been little change in the pattern of the work of the school nurses and only one staff change during the year.

They continue to carry out all forms of treatment at the clinics, hygiene and vision surveys, audiometric sweep testing, Heaf testing of new entrants and in connection with the B.C.G. scheme, assist the doctors at medical inspections and follow up, wherever necessary, by home visiting.

1,291 children were tested for visual acuity in the infant school survey and, of this number, 94 were recommended for attendance at the School Eye Clinic and 86 accepted treatment at the clinic though provision of spectacles was found not to be necessary in 38 cases.

During the year, the nurses made 1,510 domiciliary visits.

### 5.—UNCLEANLINESS

The assistant nurses have been able to devote most of their time to the work of cleanliness inspections in schools throughout the year and 64,785 inspections were carried out.

D.D.T. Head Lotion and special shampoo have again been widely distributed, without charge, and it is very disappointing to report a slight deterioration in the standard of cleanliness. 1,830

individual children were found to be unclean during the year. Of this number 721 were found to have nits on one occasion only, 1,109 were found to have nits on repeated occasions and 143 were found to be infested with lice.

The increased incidence of uncleanliness occurred, to a large extent, in a few specific schools during the early part of the year and frequent visitation had again raised the standard by the end of the year.

The assistant nurses followed up the work in schools with 996 domiciliary visits, giving advice to parents and, wherever necessary, assisting with cleansing. The number of parents requiring assistance with the cleansing of the children has also increased though all attended the clinics voluntarily and in no case was it necessary to issue a compulsory cleansing order.

The main hope for the elimination of the problem of head infestation centres on the stream-lining and modernisation of the legal formalities which have to be observed between the detection of the condition and the application of treatment. Also the principle of family treatment rather than the treatment of the individual child merits maximum support. In this, family use of 'Lorexane' shampoo is playing an important part.

There is little change in the incidence of scabies, 49 children attending for treatment, compared with 44 in the previous year, and 87 attendances were made.

## 6.—INFECTIOUS DISEASES

**Diphtheria**—No case of diphtheria occurred in Walsall during the year

1,260 children under the age of 5 years, and 731 between the ages of 5 and 15 years, a total of 1,991 were immunised against the disease. 1,107 children received a reinforcing or "booster" injection. The good response to immunisation in schools has been maintained.

**Scarlet Fever**—There were 29 cases of scarlet fever amongst school children, as compared with 69 in 1961. No deaths were recorded.

**Measles**—103 school children were notified as suffering from measles, as compared with 1,489 in 1961, but there were no deaths.

**Tuberculosis**—3 cases of respiratory tuberculosis and 3 of other forms of tuberculosis in children of school age were notified during the year.

**Other Diseases**—There were 7 cases of whooping cough, 6 of primary pneumonia, 3 of influenzal pneumonia, 31 of dysentery and 8 of food poisoning.



## 7.—SCHOOL ACCOMMODATION

(a) No. of Secondary Schools ... ..	16
County Schools ... ..	12
Voluntary Schools ... ..	4
(b) No. of Primary Schools ... ..	50
County Schools ... ..	37
Voluntary Schools ... ..	13
(c) Nursery Schools ... ..	3
(d) Reedswood Park Day Special School for 60 pupils.	
(e) Beacon Residential School for 80 Educationally Subnormal Boys.	
(f) The Castle Day Special School for 160 Educationally Sub-normal Pupils.	

The number of pupils on the register in January, 1963 was 19,905 as follows: Primary and Secondary Schools, 19,470; Nursery Schools, 101 full-time and 33 part-time, Reedswood Park Day Special School, 62; The Castle Day Special School, 160; Beacon Residential School, 79.

## 8.—PHYSICAL EDUCATION

My thanks are due to Mr. A. J. Spears, Physical Education Organiser, for the following report on Physical Education in Schools:—

“Steady progress in physical education in all types of schools has been maintained throughout the year, and in most of our departments now we can confidently say that the facilities are reasonably good. The building of new schools and improvements in existing schools have made possible the opportunities of taking physical education lessons in halls or large rooms except in one or two unfortunate cases where little can be done to provide suitable accommodation. With the opening of the Francis Martyn Secondary School imminent, it can be said that reasonable gymnasium or other indoor facilities are now available for all secondary age pupils in the Borough, except for the Wolverhampton Road Boys’ School. The teaching in these departments is also in the hands of well qualified or capable teachers. The Infant and Junior departments are continuing their good work of feeding into the Secondary Schools children who have skilful control of their body movements and are active and vigorous; they are in fact well prepared for mastering the more advanced techniques called for in the Secondary School. Modern teaching does not attempt to achieve a particular degree of skill in the performance of any set exercise, but it does inculcate adaptability



and control over bodily movements in each individual child. Evidence of this acquired control is seen when pupils are called upon to learn specialist skills inherent in athletics, swimming, diving, games, dancing, to name only a few, and here our pupils have repeatedly demonstrated their ascendancy in competition with children of other areas.

A widening interest is being shown in adventurous pursuits such as mountain activities, and schools are increasingly arranging for groups of older pupils to attend the various outdoor pursuit training schools. This is an excellent trend and caters for the types which may not necessarily derive satisfaction from the playing of corporate games.

Our faith in the potentialities of the Teaching Bath at Bloxwich has been fully justified. In its first year of use the number of swimmers in the primary schools undergoing instruction there had more than doubled. From the health and hygiene point of view it has been very gratifying to know that all tests made by the Health Department for purity of the water show that a satisfactory standard has been maintained throughout the year. This is of vital importance when one considers that a great many children are taught daily in a relatively small volume of water, and it reflects credit on the department and staff responsible for the operation of the plant and cleaning of the premises.

The year has also been noteworthy for the opening of the magnificent swimming bath at the T. P. Riley School. The improvement in swimming at this School has been most marked. The high standard of swimming which has been a feature of the town for many years has again been maintained. Local boys and girls have achieved meritorious results in outside competition on a greater scale than previously recorded. We are able to reproduce our usual summary of swimming certificates and life-saving awards and in doing so to mention with pride and satisfaction that the good work of our teachers has this year attained the highest total ever recorded

Swimming.		Boys			Girls	
		1962	1961		1962	1961
1st Class	...	50	43	...	39	21
2nd Class	...	195	155	...	111	88
3rd Class	...	328	254	...	125	137
Proficiency	...	286	213	...	200	135
Learners	...	317	317	...	409	276
Total boys and girls, 1961		...	1,639			
Total boys and girls, 1962		...	1,866			

**Royal Life-saving Society Awards**

	Boys		Girls	
	1962	1961	1962	1961
Award of Merit ... ..	—	—	—	—
Instructor ... ..	—	—	—	—
Scholar Instructor ...	—	2	—	—
Bar to Bronze Cross ...	—	—	—	—
Bronze Cross ... ..	2	2	—	—
Bar to Bronze Medallion	1	5	—	3
Bronze Medallion ...	20	14	23	10
Intermediate Certificate ...	9	32	30	6
Elementary Certificate ...	25	26	16	12
Unigrip Certificate ...	—	—	—	—
Total of boys and girls, 1961 ...			112	
Total of boys and girls, 1962 ...			126	

**A.S.A. Scholars' Awards.**

	Boys and Girls	
	1962	1961
Medallist ... ..	24	30
Advanced Award ...	5	3
Total boys and girls, 1961 ...	33	
Total boys and girls, 1962 ...	29''	

**9.—PROVISION OF MEALS AND MILK FOR SCHOOL CHILDREN**

Mr. G. Cass, Schools Meals Organiser, has been good enough to supply a report on this subject:—

	1960-61	1961-62
No. of paid meals ...	1,036,428	1,083,833
No. of free meals ...	203,135	195,255
Totals	1,239,563	1,279,088

Number of one-third pint bottles of milk provided on a typical school day in October, 1962:—

Maintained Schools ...	16,613 (86% of children in attendance)
Independant Schools ...	508 (84% of children in attendance)

### **Milk in Schools.**

An improvement in the delivery and quality of the milk supplied to schools has been noted.

### **Food Supplies.**

The provisions supplied to the school meals kitchens have been satisfactory. There has been a marked improvement in the quality of meat and fresh fruit and vegetables.

### **Kitchens.**

The kitchen at the Chuckery Junior School has been remodelled and the heavy cooking equipment renewed. The establishment now conforms with the Food Hygiene Regulations.

In order to improve the variety and presentation of meals, the Ministry of Education has approved the installation of additional heavy cooking equipment and machinery in smaller kitchens.

### **Mossley Junior School Kitchen.**

Some delay was experienced, as a result of building problems, in the opening of the above school kitchen. Transported meals were supplied to the school in the first instance. The kitchen is now operating satisfactorily.

I would like to thank the officers of the Public Health Department, especially the Food Inspectors, for their co-operation and advice in connection with Food Hygiene and Inspection."

## **10.—BEACON RESIDENTIAL SCHOOL**

I thank Mr. R. W. Peat, Headmaster of the Beacon Residential School for Educationally Subnormal Children, for the report on the work of the school in 1962:—

"During the year 1962 there were 16 admissions to the school, 6 of whom came from Walsall. (At the time of writing, 39 of the boys come from Walsall and the remaining 41 from 21 other Authorities). Of the boys who left during 1962, 13 had reached the age limit, 1 was transferred to the Castle Day Special School, 3 were transferred to the Training Centre and 2 returned to a Secondary Modern School.

The pattern of the age range and I.Q. range has continued to remain fairly stable, as is shown by the following figures.

AGE RANGE.								
7-8	8-9	9-10	10-11	11-12	12-13	13-14	14-15	15-16
0	2	6	8	8	18	12	14	12
				I.Q. RANGE.				
				50-59	60-69	70-79	80-90	
				13	23	40	4	



The average I.Q. remains at 69 despite the increasing number of boys in the I.Q. range 50-59. This would appear to be due to the admission of one or two boys of higher I.Q. for reasons of maladjustment or poor home conditions.

The average ages and I.Q.'s of the Class Groups are as follows:—

	Group A.	Group B.	Group C.	Group D.	Group E.
Average Age	15.4	14.1	13.1	11.9	10.1
Average I.Q.	71	70	73	67	66

The present trend for boys to be admitted for residential treatment to have a secondary handicap continues and the following list gives an indication of this:—

Physical Handicap	...	...	...	8
Eneuretics	...	...	...	22
Eye Defects	...	...	...	20
Epileptics	...	...	...	4
Speech Defects	...	...	...	20
Aural Defects	...	...	...	3

In addition to these a very appreciable proportion is maladjusted but it is difficult to give an accurate figure for this as this handicap is found to such varying degree and in such a variety of symptoms.

These secondary handicaps constitute a challenge which is readily accepted by the staff and an easing of the staffing position has enabled the establishment of a small remedial group, but as yet it is too early to assess the results of this work. Although it is recognised that at present it is difficult to obtain specialist speech therapy, this is an aspect which it is hoped will receive attention in the future.

Throughout the year the general health of the boys maintained a very satisfactorily high standard. Apart from a mild outbreak of diarrhoea and sickness there were remarkably few demands on the nursing duties of the matronal staff.

The following list gives details of boys receiving medical attention for one reason or another:—

	No. of cases treated
Treatment at Dental Clinic	48
Treatment at Eye Clinic	12
Orthopaedic Treatment	3
Hospital Treatment (tonsillectomy)	1
do. (eye resection)	1
do. (hernia)	1
do. (orthopaedic)	1

The arrangement whereby the General Practitioner attending the School be appointed as a part-time School Medical Officer, as mentioned in the last report, has been found to work very satisfactorily. During the year the doctor paid 48 visits to the school and at each visit he was able to see several boys. This arrangement has meant a considerable saving of the doctor's time and also the time of the school staff besides giving a more satisfactory and thorough service for the boys.

In addition to the individual treatments mentioned above, full medical and dental inspections were carried out and also the systematic immunisation against diphtheria, poliomyelitis and tuberculosis continued.

The customary Annual School activities, such as the Sports and Open Day, School outings and Christmas festivities were able to take place as usual. Thus it can be safely said that 1962 was a very satisfactory year from the point of view of the general health and welfare of the boys."

## 11—SCHOOL DENTAL SERVICE

The Principal School Dental Officer, Mrs. I. M. Millar, L.D.S., has supplied this description of the work of the School Dental Service:—

"The retirement of Mr. Morgan at the end of 1961 has further depleted an inadequate number of staff effectively to cope with the number of children in the Walsall borough. During the year I have been able to employ some part-time newly qualified dental officers. The apathy of both children and parents to dental health cannot be overcome until we have enough staff to inspect the children, to talk and encourage them to follow the simple rules of oral hygiene.

I would like to emphasise the great improvement which could be attained in the dental health of the children of Walsall if fluoridation of the local water was carried out.

9,297 dental inspections were carried out during the year, 625 of these being emergency cases. 5,080 temporary and 1,061 permanent teeth were extracted and 2,334 general anaesthetics administered. 3,039 permanent and 106 temporary teeth were filled; in addition 13 children were supplied with partial dentures.

I would like to thank the General and Manor Hospitals for the orthodontic work and X-rays which they carry out for us."

## 12—HEALTH EDUCATION

Our work in this field has continued in its various ways. It is not always easy, however, to maintain enthusiasm when one can almost see and hear the mental shutters come down when unpopular advice is given.

Cigarette smoking is the prime example of this. Medical and governmental warnings concerning the close association between the smoking of cigarettes and lung cancer and other diseases have never been more frequent and frank, and yet school children continue to commence smoking, and, it would appear, at an earlier age than formerly. Of course, parental example, and more than adequate pocket money do not help. It is strange that men and women who would not contemplate experimenting to see how much arsenic they could consume without poisoning themselves will indulge in fine calculations regarding the number of cigarettes that can be smoked per day without increasing to too great an extent the risk of fatal illness. It is ludicrous and irrational. The stark truth is, there is no such thing as a safe daily ration of cigarettes.

Television and children's hours of sleep form another close association. In far too many homes, children of all school ages do not go to bed until the evening's viewing has come to an end. Unfortunately, it is not only sleep that suffers. Family nutrition tends to be less than adequate in the evening, and the children, too tired to bother, fall into bed with minimal attention to personal cleanliness. I shall not enlarge on the other deleterious effects of television addiction. Let it suffice to mention the unsuitability for children of much of the material shown, particularly in the late evening, and the stultifying of the creative instinct and the capacity for self-amusement.

For their co-operation during 1962, I wish to thank the Education Committee, the Director of Education and his staff and the head teachers of Walsall schools. To the doctors, nurses and administrative staff of the Service my renewed thanks are due for their loyal service during the year.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

THOMAS ROSS,

Principal School Medical Officer.



# MEDICAL INSPECTION AND TREATMENT RETURNS

Year ended 31st December, 1962

## PART 1

### Medical Inspection of Pupils Attending Maintained and Assisted Primary and Secondary Schools (including Nursery and Special Schools)

#### A. PERIODIC MEDICAL INSPECTIONS.

Age Groups (Year of Birth)	Number of pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)
1958 and later	382	382	100.00	—	—
1957 ... ..	1,661	1,661	100.00	—	—
1951 ... ..	2,035	2,033	99.90	2	0.10
1948 ... ..	1,753	1,748	99.71	5	0.29
1947 and earlier	594	593	99.83	1	0.17
Total ...	6,425	6,417	99.88	8	0.12

#### PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTION.

(excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (Year of Birth)	For defective vision (exclud- ing squint)	For any other conditions recorded in Part II	Total individual pupils
(1)	(2)	(3)	(4)
1958 and later ... ..	3	5	7
1957 ... ..	15	69	80
1951 ... ..	107	87	188
1948 ... ..	86	61	139
1947 and earlier ... ..	39	17	56
Total ...	250	239	470

## B. OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	2,150
Number of Re-Inspections	...	...	...	839
				<hr/>
Total			...	2,989
				<hr/>

## C. INFESTATION WITH VERMIN.

(i)	Total number of examinations in the schools by the school nurses or other authorised persons	...	...	64,785
(ii)	Total number of individual pupils found to be infested			1,830
(iii)	Number of individual pupils in respect of whom cleansing notices were issued	...	...	...
(iv)	Number of individual pupils in respect of whom cleansing orders were issued	...	...	...

## PART II

DEFECTS FOUND BY MEDICAL INSPECTION DURING  
THE YEAR.

## A. PERIODIC INSPECTIONS.

Defect or Disease	PERIODIC INSPECTIONS				Others		Total	
	Entrants		Leavers					
	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation
Skin ... ..	15	22	22	24	31	48	68	94
Eyes—a. Vision ...	15	26	105	129	130	79	250	234
b. Squint ...	14	24	2	12	7	25	23	61
c. Other ...	—	5	2	5	—	4	2	14
Ears—a. Hearing ...	9	14	6	8	11	10	26	32
b. Otitis Media	1	13	4	10	2	17	7	40
c. Other ...	1	4	4	3	2	5	7	12
Nose and Throat ...	22	170	5	39	35	96	62	305
Speech ... ..	7	26	3	3	8	23	18	52
Lymphatic Glands ...	—	22	—	1	1	13	1	36
Heart ... ..	—	15	2	16	2	36	4	67
Lungs ... ..	1	69	1	30	—	50	2	149
Developmental—								
a. Hernia ...	3	5	—	2	2	5	5	12
b. Other ...	2	29	3	15	3	79	8	123
Orthopædic—								
a. Posture ...	—	8	2	20	—	11	2	39
b. Feet ...	—	10	—	4	2	6	2	20
c. Other ...	1	11	2	20	2	15	5	46
Nervous System—								
a. Epilepsy ...	—	5	—	2	1	9	1	16
b. Other ...	—	11	2	6	—	15	2	32
Psychological—								
a. Development	—	45	1	9	1	25	2	79
b. Stability ...	—	49	1	8	—	29	1	86
Abdomen ... ..	—	1	—	1	—	4	—	6
Other ... ..	2	13	3	13	2	25	7	51



TABLE 3.—continued

## B. SPECIAL INSPECTIONS.

Defect or Disease	SPECIAL INSPECTIONS	
	Requiring Treatment	Requiring Observation
Skin ... ..	233	30
Eyes—		
a. Vision ...	51	27
b. Squint ...	7	8
c. Other ...	37	3
Ears—		
a. Hearing ...	30	44
b. Otitis Media ...	32	11
c. Other ...	45	4
Nose and Throat ...	72	50
Speech ... ..	5	26
Lymphatic Glands ...	7	15
Heart ... ..	11	15
Lungs ... ..	51	14
Developmental—		
a. Hernia ...	4	1
b. Other ...	18	30
Orthopædic—		
a. Posture ...	16	6
b. Feet ...	17	2
c. Other ...	91	6
Nervous System—		
a. Epilepsy ...	2	8
b. Other ...	15	10
Psychological—		
a. Development ...	39	15
b. Stability ...	70	17
Abdomen ... ..	13	5
Other ... ..	301	19

### PART III

#### TREATMENT TABLES

##### A. EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	No. of cases known to have been dealt with
External and other, excluding errors of refraction and squint ... ..	37
Errors of Refraction (including squint) ...	869
Total ...	<hr/> 906 <hr/>
No. of pupils for whom spectacles were prescribed ... ..	680

##### B. DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	No. of cases known to have been dealt with
Received operative treatment:—	
(a) for diseases of the ear ... ..	26
(b) for adenoids and chronic tonsillitis	263
(c) for other nose and throat conditions	19
Received other forms of treatment ...	2
Total ...	<hr/> 310 <hr/>
Total number of pupils in Schools who are known to have been provided with hearing aids:—	
(a) In 1962 ... ..	4
(b) In previous years ... ..	7

##### C. ORTHOPÆDIC AND POSTURAL DEFECTS.

	No. of cases known to have been treated
(a) Pupils treated at Clinics or Out-patient Departments ... ..	581
(b) Pupils treated at school for postural defects ... ..	<hr/> — <hr/>
Total ...	<hr/> 581 <hr/>

D. DISEASES OF THE SKIN.  
(excluding Uncleanliness for which see Part I, C).

						No. of cases known to have been treated
Ringworm—						
(i) Scalp	...	...	...	...	...	1
(ii) Body	...	...	...	...	...	2
Scabies	...	...	...	...	...	49
Impetigo	...	...	...	...	...	127
Other skin diseases	...	...	...	...	...	298
Total					...	<hr/> 477 <hr/>

E. CHILD GUIDANCE TREATMENT.

						No. of cases known to have been treated
Pupils treated at Child Guidance Clinics	...	...	...	...	...	47

F. SPEECH THERAPY.

						No. of cases known to have been treated
Pupils treated by Speech Therapists	...	...	...	...	...	265

G. OTHER TREATMENT GIVEN.

						No. of cases known to have been dealt with
(a) Pupils with minor ailments	...	...	...	...	...	1,627
(b) Pupils who received convalescent treatment under School Health Service arrangements	...	...	...	...	...	149
(c) Pupils who received B.C.G. Vaccination	...	...	...	...	...	1,510
(d) other than (a), (b) and (c)—						
(i) Minor Eye Defects	...	...	...	...	...	108
(ii) Minor Ear Defects	...	...	...	...	...	27
(iii) Post-Tonsillectomy Breathing Exercises	...	...	...	...	...	66
Total					...	<hr/> 3,487 <hr/>



## PART IV

## DENTAL INSPECTION AND TREATMENT

(1) Number of pupils inspected by the Authority's Dental Officers—						
(a) At Periodic Inspections	...	...	...	...	8,672	
(b) As Specials	...	...	...	...	625	
TOTAL	...	...	...	...	—	9,297
(2) Number found to require treatment	...	...	...	...	7,058	
(3) Number offered treatment	...	...	...	...	6,025	
(4) Number actually treated	...	...	...	...	3,026	
(5) Attendances made by pupils for treatment	...	...	...	...	5,270	
(6) Half days devoted to:—						
(a) Periodic (School) Inspection	...	...	...	...	50	
(b) Treatment	...	...	...	...	709	
TOTAL	...	...	...	...	—	759
(7) Fillings:—						
Permanent Teeth	...	...	...	...	3,039	
Temporary Teeth	...	...	...	...	106	
TOTAL	...	...	...	...	—	3,145
(8) No. of Teeth filled:—						
Permanent Teeth	...	...	...	...	2,479	
Temporary Teeth	...	...	...	...	90	
TOTAL	...	...	...	...	—	2,569
(9) Extractions:—						
Permanent Teeth	...	...	...	...	1,061	
Temporary Teeth	...	...	...	...	5,080	
TOTAL	...	...	...	...	—	6,141
(10) Administration of general anæsthetics for extraction						2,334
(11) Orthodontics:—						
(a) Cases commenced during the year	...	...	...	...		50
(b) Cases carried forward from previous year	...	...	...	...		—
(c) Cases completed during the year	...	...	...	...		—
(d) Cases discontinued during the year	...	...	...	...		—
(e) Pupils treated with appliances	...	...	...	...		—
(f) Removable appliances fitted	...	...	...	...		—
(g) Fixed appliances fitted	...	...	...	...		—
(h) Total attendances	...	...	...	...		—
(12) Number of pupils supplied with artificial teeth	...	...	...	...		13
(13) Other operations:—						
Permanent Teeth	...	...	...	...	503	
Temporary Teeth	...	...	...	...	1	
TOTAL	...	...	...	...	—	504



